Safety Data Sheet

WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART A

Westlegate Pty Ltd.

Chemwatch: 5306-61 Version No: 7.1.1.1 Safety Data Sheet according to WHS and ADG requirements Chemwatch Hazard Alert Code: 1

ESTO

BUILDING PRODUCTS

Issue Date: 02/09/2019 Print Date: 12/09/2019 L.GHS.AUS.EN

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

Product Identifier

Product name	WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART A
Synonyms	Not Available
Other means of identification	Not Available
Relevant identified uses of the substance or mixture and uses advised against	
Relevant identified uses	As liquid resin for cement membrane.

Details of the supplier of the safety data sheet

Registered company name	Westlegate Pty Ltd.
Address	16 Frost Road Campbelltown NSW 2560 Australia
Telephone	+61 2 4628 5010
Fax	+61 2 4628 5020
Website	www.westox.com
Email	info@westox.com

Emergency telephone number

Association / Organisation	Poisons Information Centre	
Emergency telephone numbers	13 11 26 (24hr) (Australian Poisons Information Cantre), 000 (Police, Fire Brigade or Ambulance)	
Other emergency telephone numbers	0800 764 766 (24hr) (NewZealand Poisons Information Centre), 111 (NZ Emergency Services)	

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

Poisons Schedule	Not Applicable
Classification	Not Applicable
Label elements	
Hazard pictogram(s)	Not Applicable
SIGNAL WORD	NOT APPLICABLE
Hazard statement(s)	
Not Applicable	
Precautionary statement(s) Pr	revention
Not Applicable	
Precautionary statement(s) Re	esponse
Not Applicable	

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

Not Applicable

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
9003-55-8	30-70	styrene/ butadiene copolymer
100-42-5	<0.1	styrene
7732-18-5	30-60	water

SECTION 4 FIRST AID MEASURES

Description of first aid 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 or hair contact occurs: Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
Inhalation	 If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary.
Ingestion	 Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

The product contains a substantial proportion of water, therefore there are no restrictions on the type of extinguishing media which may be used. Choice of extinguishing media should take into account surrounding areas.

Though the material is non-combustible, evaporation of water from the mixture, caused by the heat of nearby fire, may produce floating layers of combustible substances.

- In such an event consider:
- In foam.
- dry chemical powder. carbon dioxide.

Special hazards arising from Fire Incompatibility	the substrate or mixture 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	 The material is not readily combustible under normal conditions. However, it will break down under fire conditions and the organic component may burn. Not considered to be a significant fire risk. Heat may cause expansion or decomposition with violent rupture of containers. Decomposes on heating and may produce toxic fumes of carbon monoxide (CO). May emit acrid smoke. 	
HAZCHEM	Not Applicable	

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Environmental precautions

See section 12

Methods and material for containment and cleaning up

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

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

SECTION 7 HANDLING AND STORAGE

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

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

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	styrene	Styrene, monomer	50 ppm / 213 mg/m3	426 mg/m3 / 100 ppm	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
styrene	Styrene	Not Available	Not Available	Not Available
Ingredient	Original IDLH		Revised IDLH	
styrene/ butadiene copolymer	Not Available		Not Available	
styrene	700 ppm		Not Available	
water	Not Available		Not Available	

for styrene:

Odour Threshold: 0.017 to 1.9 with a geometric average threshold of 0.32 ppm.

NOTE:Detector tubes measuring styrene at greater than 10 ppm are available.

The recommended TLV-TWA and STEL is based on the influence of styrene exposure on the central and peripheral nervous systems At the TWA, total daily styrene exposure to the standard 70 kg medium-frame man who inhales 10 m3 and who retains 70% of the inspired compound is 21 mg/kg with 0.5 mg/kg absorbed through the skin. The total absorbed dose can be increased six-fold with physical work and increased respiration rate.

Measurement of styrene and its metabolites in the urine can be an indication of recent exposure though this approach may be limited by factors such as the influence of alcohol consumption on styrene pharmodynamics. Exposure at or below the TLV-TWA is thought to protect the worker against the significant risks of narcosis, neuropathies and irritation although other findings suggest that neuro-optical effects are significant amongst workers exposed at 4 ppm.

Odour Safety Factor(OSF) OSF=63 (STYRENE)

Exposure controls

Exposure controls			
Appropriate engineering controls	highly effective in protecting workers and will typically be ind The basic types of engineering controls are: Process controls which involve changing the way a job activ Enclosure and/or isolation of emission source which keeps a "removes" air in the work environment. Ventilation can remo- match the particular process and chemical or contaminant in Employers may need to use multiple types of controls to preve Local exhaust ventilation usually required. If risk of overexpo Supplied-air type respirator may be required in special circo. An approved self contained breathing apparatus (SCBA) ma Provide adequate ventilation in warehouse or closed storage in turn, determine the "capture velocities" of fresh circulating Type of Contaminant: solvent, vapours, degreasing etc., evaporating from tank aerosols, furmes from pouring operations, intermittent con plating acid fumes, pickling (released at low velocity into z direct spray, spray painting in shallow booths, drum filling generation into zone of rapid air motion) grinding, abrasive blasting, tumbling, high speed wheel g high rapid air motion). Within each range the appropriate value depends on: Lower end of the range 1: Room air currents minimal or favourable to capture 2: Contaminants of low toxicity or of nuisance value only. 3: Intermittent, low production. 4: Large hood or large air mass in motion Simple theory shows that air velocity falls rapidly with distance square of distance from the contaminating source. The air extraction of solvents generated in a tank 2 meters distant for	selected hazard "physically" away from the worker and ventilation the ver or dilute an air contaminant if designed properly. The design of a vertice of the second	h. hat strategically "adds" and entilation system must n adequate protection. "escape" velocities which, Air Speed: 0.25-0.5 m/s (50-100 f/min.) 0.5-1 m/s (100-200 f/min.) 1-2.5 m/s (200-500 f/min.) 2.5-10 m/s (500-2000 f/min.) Ily decreases with the accordingly, after -2 m/s (200-400 f/min) for performance deficits within
Personal protection			
Eye and face protection	of lenses or restrictions on use, should be created for ea class of chemicals in use and an account of injury expe should be readily available. In the event of chemical exp	lenses may absorb and concentrate irritants. A written policy docum ach workplace or task. This should include a review of lens absorptio rience. Medical and first-aid personnel should be trained in their rem osure, begin eye irrigation immediately and remove contact lens as s fiction - lens should be removed in a clean environment only after wo 59], [AS/NZS 1336 or national equivalent]	n and adsorption for the oval and suitable equipment oon as practicable. Lens
Skin protection	See Hand protection below		
Hands/feet protection	The selection of suitable gloves does not only depend on the Where the chemical is a preparation of several substances, t checked prior to the application. The exact break through time for substances has to be obtain choice. Personal hygiene is a key element of effective hand care. Glo thoroughly. Application of a non-perfumed moisturiser is recc Suitability and durability of glove type is dependent on usage frequency and duration of contact, chemical resistance of glove material, glove thickness and exterity Select gloves tested to a relevant standard (e.g. Europe EN	b. Important factors in the selection of gloves include: 374, US F739, AS/NZS 2161.1 or national equivalent). ntact may occur, a glove with a protection class of 5 or higher (break	and has therefore to be erved when making a final ould be washed and dried

	. When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to
	EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
	 Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
	Contaminated gloves should be replaced.
	As defined in ASTM F-739-96 in any application, gloves are rated as:
	Excellent when breakthrough time > 480 min
	Good when breakthrough time > 20 min
	Fair when breakthrough time < 20 min
	Poor when glove material degrades
	For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.
	It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of
	the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.
	Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers' technical data should always be taken into account to ensure selection of the most appropriate glove for the task.
	Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:
	Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are
	only likely to give short duration protection and would normally be just for single use applications, then disposed of.
	Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion
	 Interferences of the control of the co
	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.
	Wear chemical protective gloves, e.g. PVC.
	Wear safety footwear or safety gumboots, e.g. Rubber
Body protection	See Other protection below
	► Overalls.
	▶ P.V.C. apron.
Other protection	▶ 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:

WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART A

Material	CPI
BUTYL	С
NATURAL RUBBER	С
NEOPRENE	С
NITRILE	C
NITRILE+PVC	C
PE/EVAL/PE	C
PVA	С
PVC	C
SARANEX-23	C
TEFLON	C
VITON	С

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Respiratory protection

Type A-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 5 x ES	A-AUS / Class 1 P2	-	A-PAPR-AUS / Class 1 P2
up to 25 x ES	Air-line*	A-2 P2	A-PAPR-2 P2
up to 50 x ES	-	A-3 P2	-
50+ x ES	-	Air-line**	-

^ - Full-face

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

Appearance	Milky white emulsion; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.0-1.05
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
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 Applicable	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

See section 7
 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
See section 7
See section 7
See section 7
See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Not normally a hazard due to non-volatile nature of product The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting		
Ingestion	The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract disconfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern. High molecular weight material; on single acute exposure would be expected to pass through gastrointestinal tract with little change / absorption. Occasionally accumulation of the solid material within the alimentary tract may result in formation of a bezoar (concretion), producing discomfort.		
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. Irritation and skin reactions are possible with sensitive skin 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	Limited evidence or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.		
Chronic	polymers (thus reducing the required level of solvent use and creating a more PLCs as those	esently exists inadequate data for making a satisfactory assessment. of low concern (PLC). The trend towards production of lower molecular weight "environmentally-friendly" material) has brought with it the need to define n 10% of the molecules with molecular weight below 500 and less than 25% of ted low concern functional groups or moderate concern reactive functional t developed by the US EPA describing whether the reactive functional group igh concern groups are present) or high concern reactive functional groups oresent). oups). ith irreversible lung damage due to lung overloading and impaired clearance mer is inhaled at low levels and/or infrequently, it is assumed that it will be r high concern Classification of the polymer as a PLC, in accordance with ne polymer (during its import, manufacture, use, storage, handling or n the respirable range, a hazard which may need to assessed in the health y be released into the environment in large quantities and produce an ing 1000 are unlikely to pass through biological membranes, oligomers with 500, may. Estimations based on a "highly" dispersed polymer population ng a reactive group of high concern must be 5000 to be considered a PLC;	
WESTOX FLEXIBLE CEMENT	TOXICITY	IRRITATION	
MEMBRANE (FCM) PART A	Not Available	Not Available	

	1	
	TOXICITY	IRRITATION
styrene/ butadiene copolymer	Dermal (rabbit) LD50: >18800 mg/kg ^[2]	Eye (rabbit) 500: mg/24h -
	Oral (rat) LD50: 67022 mg/kg ^[2]	Eye : Mild
	тохісіту	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 100 mg/24h - moderate
styrene	Inhalation (rat) LC50: 11.8 mg/l/4H ^[2]	Eye (rabbit): 100 mg/24h - moderate
	Oral (rat) LD50: =1000 mg/kg ^[2]	Skin (rabbit): 500 mg - mild
		Skin (rabbit): 500 mg - mild
	ΤΟΧΙΟΙΤΥ	IRRITATION
water	Oral (rat) LD50: >90000 mg/kg ^[2]	Not Available
Legend:	1. Value obtained from Europe ECHA Registered Substance data extracted from RTECS - Register of Toxic Effect of cher	es - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified mical Substances
STYRENE/ BUTADIENE COPOLYMER	The material may be irritating to the eye, with prolonged cont conjunctivitis. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in a	act causing inflammation. Repeated or prolonged exposure to irritants may produce

Evidence of carcinogenicity may be inadequate or limited in animal testing. 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 STYRENE (spongiosis) and intracellular oedema of the epidermis. WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans. No significant acute toxicological data identified in literature search. WATER Acute Toxicity × Carcinogenicity × × X Skin Irritation/Corrosion Reproductivity Serious Eye Damage/Irritation × STOT - Single Exposure × Respiratory or Skin × STOT - Repeated Exposure × sensitisation

Legend: 🗙 –

Aspiration Hazard

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X − Data either not available or does not fill the criteria for classification
→ − Data available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Mutagenicity

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Toxicity

WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART A	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	Not Available	Not Available	Not Available	Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
styrene/ butadiene copolymer	Not Available	Not Available	Not Available	Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	3.963mg/L	3
	EC50	48	Crustacea	4.7mg/L	2
styrene	EC50	96	Algae or other aquatic plants	0.72mg/L	4
	EC10	96	Algae or other aquatic plants	=0.13mg/L	1
	NOEC	168	Crustacea	0.00006mg/L	2
water	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	897.520mg/L	3
	EC50	96	Algae or other aquatic plants	8768.874mg/L	3

d: 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.

Ingredient	Persistence: Water/Soil	Persistence: Air
styrene	HIGH (Half-life = 210 days)	LOW (Half-life = 0.3 days)
water	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation	
styrene	LOW (BCF = 77)	
water	LOW (LogKOW = -1.38)	

Mobility in soil

Ingredient	Mobility
styrene	LOW (KOC = 517.8)
water	LOW (KOC = 14.3)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

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

STYRENE/ BUTADIENE COPOLYMER IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

GESAMP/EHS Composite List - GESAMP Hazard Profiles

IMO IBC Code Chapter 17: Summary of minimum requirements

- International Agency for Research on Cancer (IARC) Agents Classified by the IARC Monographs International Air Transport Association (IATA) Dangerous Goods Regulations
- International Air Transport Association (IATA) Dangerous Goods Regulations

International Air Transport Association (IATA) Dangerous Goods Regulations - Prohibited List Passenger and Cargo Aircraft

STYRENE 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) - Goods Too Dangerous To Be Transported	IMO IBC Code Chapter 17: Summary of minimum requirements
Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
Australia Exposure Standards	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Monographs
Australia Hazardous chemicals which may require Health Monitoring	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Inventory of Chemical Substances (AICS)	International Air Transport Association (IATA) Dangerous Goods Regulations - Prohibited List
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule	Passenger and Cargo Aircraft
5	International Maritime Dangerous Goods Requirements (IMDG Code)
	United Nations Recommendations on the Transport of Dangerous Goods Model Regulations
WATER IS FOUND ON THE FOLLOWING REGULATORY LISTS	

Australia Inventory of Chemical Substances (AICS)

National Inventory Status

IMO IBC Code Chapter 18: List of products to which the Code does not apply

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (styrene; styrene/ butadiene copolymer; water)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (styrene/ butadiene copolymer)
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Revision Date	02/09/2019
Initial Date	07/06/2018

SDS Version Summary

Version	Issue Date	Sections Updated
6.1.1.1	11/09/2018	Name
7.1.1.1	25/01/2019	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. 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_e IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL : No Observed Adverse Effect Level LOAEL: Lowest 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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Safety Data Sheet

WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART B

Westlegate Pty Ltd.

Chemwatch: 5306-62 Version No: 5.1.1.1 Safety Data Sheet according to WHS and ADG requirements Chemwatch Hazard Alert Code: 3

ESTO

BUILDING PRODUCTS

Issue Date: **29/08/2019** Print Date: **12/09/2019** L.GHS.AUS.EN

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

Product Identifier

Product name	WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART B
Synonyms	Not Available
Other means of identification	Not Available
Relevant identified uses of the substance or mixture and uses advised against	
Relevant identified uses	Used for waterproofing masonry and as an adhesive for render over masonry surfaces.

Details of the supplier of the safety data sheet

Registered company name	Westlegate Pty Ltd.
Address	16 Frost Road Campbelltown NSW 2560 Australia
Telephone	+61 2 4628 5010
Fax	+61 2 4628 5020
Website	www.westox.com
Email	info@westox.com

Emergency telephone number

Association / Organisation	Organisation Poisons Information Centre	
Emergency telephone numbers	13 11 26 (24hr) (Australian Poisons Information Cantre), 000 (Police, Fire Brigade or Ambulance)	
Other emergency telephone numbers	0800 764 766 (24hr) (NewZealand Poisons Information Centre), 111 (NZ Emergency Services)	

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

Classification of the substant		
Poisons Schedule	Not Applicable	
Classification ^[1]	Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Germ cell mutagenicity Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Specific target organ toxicity - repeated exposure 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)		
H332	Harmful if inhaled.	
H315	Causes skin irritation.	
H318	Causes serious eye damage.	

H317	May cause an allergic skin reaction.
H341	Suspected of causing genetic defects.
H335	May cause respiratory irritation.
H373	May cause damage to organs through prolonged or repeated exposure.
Precautionary statement(s) Prevention	
P201	Obtain special instructions before use.
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.
P281	Use personal protective equipment as required.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P313	IF exposed or concerned: Get medical advice/attention.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P362	Take off contaminated clothing and wash before reuse.
P302+P352	IF ON SKIN: Wash with plenty of soap and water.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
65997-15-1	>90	portland cement
Not Available	1-10	non caking additives
14807-96-6	<100	talc
Not Available	<10	chlorite / dolomite
14808-60-7	<2	silica crystalline - quartz

SECTION 4 FIRST AID MEASURES

Description of first aid measures

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

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

For acute or short term repeated exposures to dichromates and chromates:

- Absorption occurs from the alimentary tract and lungs.
- The kidney excretes about 60% of absorbed chromate within 8 hours of ingestion. Urinary excretion may take up to 14 days.
- Establish airway, breathing and circulation. Assist ventilation.
- Induce emesis with Ipecac Syrup if patient is not convulsing, in coma or obtunded and if the gag reflex is present.
- Otherwise use gastric lavage with endotracheal intubation.
- Fluid balance is critical. Peritoneal dialysis, haemodialysis or exchange transfusion may be effective although available data is limited.
- British Anti-Lewisite, ascorbic acid, folic acid and EDTA are probably not effective.
- There are no antidotes.
- Primary irritation, including chrome ulceration, may be treated with ointments comprising calcium-sodium-EDTA. This, together with the use of frequently renewed dressings, will ensure rapid healing of any ulcer which may develop.

The mechanism of action involves the reduction of Cr (VI) to Cr(III) and subsequent chelation; the irritant effect of Cr(III)/ protein complexes is thus avoided. [ILO Encyclopedia]

[Ellenhorn and Barceloux: Medical Toxicology]

- Manifestation of aluminium toxicity include hypercalcaemia, anaemia, Vitamin D refractory osteodystrophy and a progressive encephalopathy (mixed dysarthria-apraxia of speech, asterixis, tremulousness, myoclonus, dementia, focal seizures). Bone pain, pathological fractures and proximal myopathy can occur.
- > Symptoms usually develop insidiously over months to years (in chronic renal failure patients) unless dietary aluminium loads are excessive.
- + Serum aluminium levels above 60 ug/ml indicate increased absorption. Potential toxicity occurs above 100 ug/ml and clinical symptoms are present when levels exceed 200 ug/ml.
- Deferoxamine has been used to treat dialysis encephalopathy and osteomalacia. CaNa2EDTA is less effective in chelating aluminium.

[Ellenhorn and Barceloux: Medical Toxicology]

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]

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	Under certain conditions the material may become combustible because of the ease of ignition which occurs after the material reaches a high specific area ratio (thin sections, fine particles, or molten states). However, the same material in massive solid form is comparatively difficult to ignite. Nearly all metals will burn in air under certain conditions. Some are oxidised rapidly in the presence of air or moisture, generating sufficient heat to reach their ignition temperatures. Others oxidise so slowly that heat generated during oxidation is dissipated before the metal becomes hot enough to ignite. Particle size, shape, quantity, and alloy are important factors to be considered when evaluating metal combustibility. Combustibility of metallic alloys may differ and vary widely from the combustibility characteristics of the alloys' constituent elements. Decomposition may produce toxic fumes of: silicon dioxide (SIO2) When aluminium oxide dust is dispersed in air, firefighters should wear protection against inhalation of dust particles, which can also contain hazardous substances from the fire absorbed on the alumina particles. May emit poisonous fumes. May emit corrosive fumes.	
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	 Remove all ignition sources. Clean up all spills immediately. Avoid contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Use dry clean up procedures and avoid generating dust. Place in a suitable, labelled container for waste disposal.
Major Spills	 Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses. Recover product wherever possible. IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal. ALWAYS: Wash area down with large amounts of water and prevent runoff into drains. If contamination of drains or waterways occurs, advise Emergency Services.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling		
Safe handling	 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. 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 scoap and water after handling. Work clothes should be laundered separately. Launder contaminated clothing before re-use. Use good occupational work practice. Observe manufacturer's storage and handling recommendations contained within this SDS. Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained. 	
Other information	 Consider storage under inert gas. Store in original containers. Keep containers securely sealed. Store in a cool, dry area protected from environmental extremes. 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. For major quantities: Consider storage in bunded areas - ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams). Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities. 	

Conditions for safe storage, including any incompatibilities

Suitable container	 Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	For aluminas (aluminium oxide): Incompatible with hot chlorinated rubber. In the presence of chlorine trifluoride may react violently and ignite. -May initiate explosive polymerisation of olefin oxides including ethylene oxide. -Produces exothermic reaction above 200 C with halocarbons and an exothermic reaction at ambient temperatures with halocarbons in the presence of other metals. -Produces exothermic reaction with oxygen difluoride. -May form explosive mixture with oxygen difluoride. -Porms explosive mixture with oxygen difluoride. -Forms explosive mixtures with sodymen tirate. -Reacts vigorously with vinyl acetate. Aluminium oxide is an amphoteric substance, meaning it can react with both acids and bases, such as hydrofluoric acid and sodium hydroxide, acting as an acid with a base and a base with an acid, neutralising the other and producing a salt. Calcium oxide: • reacts violently with water, evolving high quantities of heat • reacts violently, with possible ignition or explosion, with acids, anilinium perchlorate, bromine pentafluoride, chlorine trifluoride, fluorine, hydrogen fluoride, hydrazine, hydrogen sulfide, hydrogen trisulfide, isopropyl isocyanide dichloride, light metals, lithium, magnesium, powdered aluminium, phosphorus, potassium, sulfur trioxide • increase the explosive sensitivity of azides, nitroalkanes (e.g. nitroethane, nitromethane, 1-nitropropane etc.)

 is incompatible with boric acid, boron trifluoride, carbon dioxide, ethanol, halogens (such as fluorine), metal halides, phosphorus pentoxide, selenium oxychloride, sulfur dioxide and many organic materials Calcium sulfate:
 reacts violently with reducing agents, acrolein, alcohols, chlorine trifluoride, diazomethane, ethers, fluorine, hydrazine, hydrazinium perchlorate, hydrogen peroxide, finely divided aluminium or magnesium, peroxyfuroic acid, red phosphorus, sodium acetylide
 sensitises most organic azides which are unstable shock- and heat- sensitive explosives
► may form explosive materials with 1,3-di(5-tetrazolyl)triazene
is incompatible with glycidol, isopropyl chlorocarbonate, nitrosyl perchlorate, sodium borohydride
▶ is hygroscopic; reacts with water to form gypsum and Plaster of Paris
For iron oxide (ferric oxide):
Avoid storage with aluminium, calcium hypochlorite and ethylene oxide.
Risk of explosion occurs following reaction with powdered aluminium, calcium silicide, ethylene oxide (polymerises), carbon monoxide, magnesium and perchlorates.
Risk of ignition or formation of flammable gases or vapours occurs following reaction with carbides, for example caesium carbide, (produces heat), hydrogen sulfide, hydrogen peroxide (decomposes).
An intimately powered mixture with aluminium, usually ignited by magnesium ribbon, reacts with an intense exotherm to produce molten iron in the commercial "thermit" welding process
 WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively.
The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive.
Avoid reaction with borohydrides or cyanoborohydrides
 Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.
 Avoid contact with copper, aluminium and their alloys.
▶ NOTE: May develop pressure in containers; open carefully. Vent periodically.
► Segregate from alcohol, water.

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	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	talc	Talc, (containing no asbestos fibres)	2.5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Silica - Crystalline: Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	See Silica -Crystalline

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1		TEEL-2	TEEL-3
talc	Talc	6 mg/m3		66 mg/m3	400 mg/m3
silica crystalline - quartz	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m3		33 mg/m3	200 mg/m3
Ingredient	Original IDLH		Revised IDLH		
portland cement	5,000 mg/m3		Not Available		
talc	1,000 mg/m3		Not Available		
silica crystalline - quartz	25 mg/m3 / 50 mg/m3		Not Available		

MATERIAL DATA

for calcium silicate:

containing no asbestos and <1% crystalline silica

ES TWA: 10 mg/m3 inspirable dust

TLV TWA: 10 mg/m3 total dust (synthetic nonfibrous) A4

Although in vitro studies indicate that calcium silicate is more toxic than substances described as "nuisance dusts" is thought that adverse health effects which might occur following exposure to 10-20 mg/m3 are likely to be minimal. The TLV-TWA is thought to be protective against the physical risk of eye and upper respiratory tract irritation in workers and to prevent interference with vision and deposition of particulate in the eyes, ears, nose and mouth.

NOTE: This substance has been classified by the ACGIH as A4 NOT classifiable as causing Cancer in humans

For aluminium oxide:

The experimental and clinical data indicate that aluminium oxide acts as an "inert" material when inhaled and seems to have little effect on the lungs nor does it produce significant organic disease or toxic effects when exposures are kept under reasonable control.

[Documentation of the Threshold Limit Values], ACGIH, Sixth Edition

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 um (+-) 0.3 um and with a geometric standard deviation of 1.5 um (+-) 0.1 um, i.e..generally less than 5 um.

Exposure controls

•	
Appropriate engineering controls	Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use. Employers may need to use multiple types of controls to prevent employee overexposure.

	Supplied-air type respirator may be required in special circu An approved self contained breathing apparatus (SCBA) ma	e area. Air contaminants generated in the workplace possess varying	
	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 con plating acid fumes, pickling (released at low velocity into z	tainer filling, low speed conveyer transfers, welding, spray drift, rone of active generation)	0.5-1 m/s (100-200 f/min.)
	direct spray, spray painting in shallow booths, drum filling generation into zone of rapid air motion)	, conveyer loading, crusher dusts, gas discharge (active	1-2.5 m/s (200-500 f/min.)
	grinding, abrasive blasting, tumbling, high speed wheel g high rapid air motion).	enerated dusts (released at high initial velocity into zone of very	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	
	square of distance from the extraction point (in simple cases reference to distance from the contaminating source. The air extraction of solvents generated in a tank 2 meters distant fr	e away from the opening of a simple extraction pipe. Velocity general s). Therefore the air speed at the extraction point should be adjusted r velocity at the extraction fan, for example, should be a minimum of 1 om the extraction point. Other mechanical considerations, producing r velocities are multiplied by factors of 10 or more when extraction sy	, accordingly, after -2 m/s (200-400 f/min) for performance deficits within
Personal protection			
Eye and face protection	of lenses or restrictions on use, should be created for ea class of chemicals in use and an account of injury expe should be readily available. In the event of chemical exp	t lenses may absorb and concentrate irritants. A written policy docum ach workplace or task. This should include a review of lens absorptic erience. Medical and first-aid personnel should be trained in their rem posure, begin eye irrigation immediately and remove contact lens as s ritation - lens should be removed in a clean environment only after wo 59], [AS/NZS 1336 or national equivalent]	on and adsorption for the loval and suitable equipment soon as practicable. Lens
Skin protection	See Hand protection below		
Hands/feet protection	 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 learther 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 brandy time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal tygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly, Application of a non-perfumed moisturiser is recommended. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: threquency and duration of contact, chemical resistance of glove material, glove thickness and deatentity Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent). When only brief contact is expected, 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. Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use. Contaminated gloves should be replaced. As defined in ASTM F-739-66 in any application, gloves are rated as: Excellent when breakthrough time > 20 min For when breakthrough time > 20 min		

	abrasion or puncture potential Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. • Neoprene rubber gloves Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present. • polychloroprene. • nitrile rubber. • butyl rubber. • butyl rubber. • polyvinyl chloride. Gloves should be examined for wear and/ or degradation constantly.
Body protection	See Other protection below
Other protection	 Overalls. P.V.C. apron. Barrier cream. Skin cleansing cream. Eye wash unit.

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

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)

• Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.

The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).

Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.

Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.

Use approved positive flow mask if significant quantities of dust becomes airborne.

Try to avoid creating dust conditions.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance Fine powder ranging in colour from grey to off-white and no distinctive odour; reacts with water. Available in various colours. (Light Green, Off white and dark grey). Slight, reacts on mixing with water forming an alkaline (caustic) solution (pH >11). Material is highly alkaline when mixed with water. Particle size: Up to 50% of the fresh dry material may be respirable (below 10 microns)

Physical state	Divided Solid	Relative density (Water = 1)	3.0-3.2
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	>1200	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Reacts	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Applicable

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial 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 dusts, generated by the material, during the course of normal handling, may be harmful. Inhalation may result in chrome ulcers or sores of nasal mucosa and lung damage. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual.
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Contact with aluminas (aluminium oxides) may produce a form of irritant dermatitis accompanied by pruritus. Though considered non-harmful, slight irritation may result from contact because of the abrasive nature of the aluminium oxide particles. Four students received severe hand burns whilst making moulds of their hands with dental plaster substituted for Plaster of Paris. The dental plaster known as "Stone" was a special form of calcium sulfate hemihydrate containing alpha-hemihydrate crystals that provide high compression strength to the moulds. Beta-hemihydrate (normal Plaster of Paris) does not cause skin burns in similar circumstances. Handling wet cement contact dermatitis. Cement when wet is quite alkaline and this alkali action on the skin contributes strongly to cement contact dermatitis ince it may cause drying and defatting of the skin which is followed by hardening, cracking, lesions developing, possible infections of lesions and penetration by soluble salts. Skin contact may result in severe irritation particularly to broken skin. Ulceration known as "chrome ulcers" may develop. Chrome ulcers and skin
Eye	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Chronic	 Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Strong evidence exists that the substance may cause inversible but non-lethal mutagenic effects following a single exposure. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals. Harmful: danger of serious damage to health by prolonged exposure through inhalation. Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage may become apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicity tests. Exposure to the material may result in a possible risk of irreversible effects. The material may produce mutagenic effects in man. This concern is raised, generally, on the basis of appropriate studies using mammalian somatic cells in vivo. Such findings are often supported by positive results from in vitro mutagenicity studies. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Chronic exposure to aluminas (aluminitum oxides) of particle size 1.2 microns did not produce significant systemic or respiratory system effects in workers. Epidemiologic surveys have indicated an excess of nonmalignant respiratory disease in workers exposed to aluminum oxide during abrasives production. Very fine Al2O3 powder was not fibrogenic in rats, guinea pigs, or hamsters when inhaled for 6 to 12 months and sacrificed a periods up to 12

elementary aluminium, or its oxides or hydroxides when they occur as dusts, fumes or vapours. Only those particles small enough to enter the alveolii (sub
um) are able to produce pathogenic effects in the lungs. Red blood cells and rabbit alveolar macrophages exposed to calcium silicate insulation materials in vitro showed haemolysis in one study but not in anoth
Both studies showed the substance to be more cytotoxic than titanium dioxide but less toxic than asbestos.
In a small cohort mortality study of workers in a wollastonite quarry, the observed number of deaths from all cancers combined and lung cancer were lowe
than expected. Wollastonite is a calcium inosilicate mineral (CaSiO3). In some cases, small amounts of iron (Fe), and manganese (Mn), and lesser
amounts of magnesium (Mg) substitute for calcium (Ca) in the mineral formulae (e.g., rhodonite)
In an inhalation study in rats no increase in tumour incidence was observed but the number of fibres with lengths exceeding 5 um and a diameter of less th 3 um was relatively low. Four grades of wollastonite of different fibre size were tested for carcinogenicity in one experiment in rats by intrapleural
implantation. There was no information on the purity of the four samples used. A slight increase in the incidence of pleural sarcomas was observed with
three grades, all of which contained fibres greater than 4 um in length and less than 0.5 um in diameter.
In two studies by intraperitoneal injection in rats using wollastonite with median fibre lengths of 8.1 um and 5.6 um respectively, no intra-abdominal turnou
were found.
Evidence from wollastonite miners suggests that occupational exposure can cause impaired respiratory function and pneumoconiosis. However animal
studies have demonstrated that wollastonite fibres have low biopersistence and induce a transient inflammatory response compared to various forms of
asbestos. A two-year inhalation study in rats at one dose showed no significant inflammation or fibrosis
Cement contact dermatitis (CCD) may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is due to solu
chromates (chromate compounds) present in trace amounts in some cements and cement products. Soluble chromates readily penetrate intact skin.
Cement dermatitis can be characterised by fissures, eczematous rash, dystrophic nails, and dry skin; acute contact with highly alkaline mixtures may cause
localised necrosis.
Cement eczema may be due to chromium in feed stocks or contamination from materials of construction used in processing the cement. Sensitisation to
chromium may be the leading cause of nickel and cobalt sensitivity and the high alkalinity of cement is an important factor in cement dermatoses [ILO]. Repeated, prolonged severe inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer from dust-induced
bronchitis with chronic bronchitis reported in 17% of a group occupationally exposed to high dust levels.
Respiratory symptoms and ventilatory function were studied in a group of 591 male Portland cement workers employed in four Taiwanese cement plants, v
at least 5 years of exposure (1). This group had a significantly lowered mean forced vital capacity (FCV), forced expiratory volume at 1 s (FEV1) and force
expiratory flows after exhalation of 50% and 75% of the vital capacity (FEF50, FEF75). The data suggests that occupational exposure to Portland cement
dust may lead to a higher incidence of chronic respiratory symptoms and a reduction of ventilatory capacity.
Chun-Yuh et al; Journal of Toxicology and Environmental Health 49: 581-588, 1996
Overexposure to respirable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include
decreased vital lung capacity, chest infections
Repeated exposures, in an occupational setting, to high levels of fine- divided dusts may produce a condition known as pneumoconiosis which is the
lodgement of any inhaled dusts in the lung irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns
(1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breat on exertion (exertional dyspnea), increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucou
vital capacity decreases further and shortness of breath becomes more severe. Other signs or symptoms include altered breath sounds, diminished lung
capacity, diminished oxygen uptake during exercise, emphysema and pneumothorax (air in lung cavity) as a rare complication.
Removing workers for possibility of further exposure to dust generally leads to halting the progress of the lung abnormalities. Where worker-exposure
potential is high, periodic examinations with emphasis on lung dysfunctions should be undertaken
Dust inhalation over an extended number of years may produce pneumoconiosis Pneumoconiosis is the accumulation of dusts in the lungs and the tissue
reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is
identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.
Chronic excessive iron exposure has been associated with haemosiderosis and consequent possible damage to the liver and pancreas. Haemosiderin is
golden-brown insoluble protein produced by phagocytic digestion of haematin (an iron-based pigment). Haemosiderin is found in most tissues, especial
in the liver, in the form of granules. Other sites of haemosiderin deposition include the pancreas and skin. A related condition, haemochromatosis, which
involves a disorder of metabolism of these deposits, may produce cirrhosis of the liver, diabetes, and bronze pigmentation of the skin - heart failure may
eventually occur.
Such exposure may also produce conjunctivitis, choroiditis, retinitis (both inflammatory conditions involving the eye) and siderosis of tissues if iron remain these tissues. Siderosis is a form of pneumoconiosis produced by iron dusts. Siderosis also includes discoloration of organs, excess circulating iron
and degeneration of the retina, lens and uvea as a result of the deposition of intraocular iron. Siderosis might also involve the lungs - involvement rarely
develops before ten years of regular exposure. Often there is an accompanying inflammatory reaction of the bronchi. Permanent scarring of the lungs do
not normally occur.
High levels of iron may raise the risk of cancer. This concern stems from the theory that iron causes oxidative damage to tissues and organs by generati
highly reactive chemicals, called free radicals, which subsequently react with DNA. Cells may be disrupted and may be become cancerous. People whose
genetic disposition prevents them from keeping tight control over iron (e.g. those with the inherited disorder, haemochromatosis) may be at increased risi
Iron overload in men may lead to diabetes, arthritis, liver cancer, heart irregularities and problems with other organs as iron builds up.
[K. Schmidt, New Scientist, No. 1919 pp.11-12, 2nd April, 1994]
Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

WESTOX FLEXIBLE CEMENT	ΤΟΧΙΟΙΤΥ	IRRITATION	
MEMBRANE (FCM) PART B	Not Available	Not Available	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
portland cement	Not Available	Not Available	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]	
talc	Oral (rat) LD50: >5000 mg/kg ^[1]	Skin (human): 0.3 mg/3d-l mild	
		Skin: no adverse effect observed (not irritating) ^[1]	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
silica crystalline - quartz	Oral (rat) LD50: =500 mg/kg ^[2]	Not Available	
Legend:	1. Value obtained from Europe ECHA Registered Substances -	Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified	
Logend.	data extracted from RTECS - Register of Toxic Effect of chemical Substances		

The following information refers to contact allergens as a group and may not be specific to this product.

PORTLAND CEMENT

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.		
TALC	For talc (a form of magnesium silicate) The overuse of talc in nursing infants has resulted in pulmonary oedema, pneumonia and death within hours of inhaling talcum powder. The powder dries the mucous membranes of the bronchioles, disrupts pulmonary clearance, clogs smaller airways. Victims display wheezing, rapid or difficult breathing, increased pulse, cyanosis, fever. Mild exposure may cause relatively minor inflammatory lung disease. Long term exposure may show wheezing, weakness, productive cough, limited chest expansion, scattered rales, cyanosis. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.		
SILICA CRYSTALLINE - QUARTZ	WARNING: For inhalation exposure <u>ONLY</u> : This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS The International Agency for Research on Cancer (IARC) has classified occupational exposures to respirable (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease. Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours. * Millions of particles per cubic foot (based on impinger samples counted by light field techniques). NOTE : the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.		
PORTLAND CEMENT & TALC	Asthma-like symptoms may continue for months or even y reactive airways dysfunction syndrome (RADS) which can diagnosis of RADS include the absence of preceding resp within minutes to hours of a documented exposure to the i bronchial hyperreactivity on methacholine challenge testin in the criteria for diagnosis of RADS. RADS (or asthma) of and duration of exposure to the irritating substance. Inc concentrations of irritating substance (often particulate in dyspnea, cough and mucus production. No significant acute toxicological data identified in literatu	n occur following exposure to high levels piratory disease, in a non-atopic individua rritant. A reversible airflow pattern, on sp g and the lack of minimal lymphocytic inf following an irritating inhalation is an inf lustrial bronchitis, on the other hand, is a nature) and is completely reversible after	s of highly irritating compound. Key criteria for the al, with abrupt onset of persistent asthma-like symptoms birometry, with the presence of moderate to severe lammation, without eosinophilia, have also been included requent disorder with rates related to the concentration a disorder that occurs as result of exposure due to high
Acute Toxicity	✓	Carcinogenicity	×
Skin Irritation/Corrosion	✓	Reproductivity	×
	✓	STOT - Single Exposure	✓
Serious Eye Damage/Irritation	*		
Serious Eye Damage/Irritation Respiratory or Skin sensitisation	*	STOT - Repeated Exposure	✓

Data available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART B Available		Not Available	Not Available	Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
portland cement	Not Available	Not Available	Not Available	Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	89-581.016mg/L	2
talc	EC50	96	Algae or other aquatic plants	7-202.7mg/L	2
	NOEC	720	Crustacea	1-459.798mg/L	2
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCI
silica crystalline - quartz	Not Available	Not Available	Not Available	Not Available	Not Available
Legend:		, ·	Registered Substances - Ecotoxicological Inform Ecotox database - Aquatic Toxicity Data 5. ECET(, ,	
		c Toxicity Data (Estimated) 4. US EPA, I centration Data 7. METI (Japan) - Bioco		JC Aqualic nazaro Assessment	Dala 0. IVI I

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

Version No: 5.1.1.1

WESTOX FLEXIBLE CEMENT MEMBRANE (FCM) PART B

Ingredient	Bioaccumulation
	No Data available for all ingredients
Mobility in soil	
Mobility in soil Ingredient	Mobility
-	Mobility No Data available for all ingredients

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 SDS and observe all notices pertaining to the product. Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked. A Hierarchy of Controls seems to be common - the user should investigate: Reduction Reuse Recycling Disposal (if all else fails) This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. 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 approprinte. In most instances the supplier of the material should be consulted. 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. It may be necessary to collect all wash water for recycling options. Consult State Land Waste Management Authority. Recycle wherever possible or consult manufacturer for recycling options. Consult State Land Waste Management Authority for disposal. Bury residue in an authorised landfill. Recycle containers if possible, or dispose of in an authorised landfill.

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

PORTLAND CEMENT IS FOUND ON THE FOLLOWING REGULATORY LISTS	
Australia Exposure Standards	Australia Inventory of Chemical Substances (AICS)
TALC IS FOUND ON THE FOLLOWING REGULATORY LISTS	
Australia Exposure Standards	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
Australia Inventory of Chemical Substances (AICS)	Monographs
SILICA CRYSTALLINE - QUARTZ IS FOUND ON THE FOLLOWING REGULATORY LISTS	
Australia Exposure Standards	Australia Inventory of Chemical Substances (AICS)
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

National Inventory Status

National Inventory	Status		
Australia - AICS	Yes		
Canada - DSL	Yes		
Canada - NDSL	No (talc; portland cement; silica crystalline - quartz)		
China - IECSC	Yes		
Europe - EINEC / ELINCS / NLP	Yes		

Japan - ENCS	No (portland cement)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (portland cement)
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Revision Date	29/08/2019
Initial Date	07/06/2018

SDS Version Summary

Version	Issue Date	Sections Updated
2.1.1.1	07/06/2018	Appearance, Ingredients, Physical Properties
5.1.1.1	29/08/2019	Acute Health (inhaled), Classification, Environmental

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 Limit₀ IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL : No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index

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