

Theo Forch ASK-Standard K105 310 ml Forch Australia Pty Ltd

Chemwatch: **4777-39**Version No: **3.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: **01/11/2019**Print Date: **22/02/2021**S.GHS.AUS.EN

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

Product Identifier

Product name	Theo Forch ASK-Standard K105 310 ml
Chemical Name	Not Applicable
Synonyms	Article No.: 6600 6420, 6604 6420
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses Adhesives, sealants.

Details of the supplier of the safety data sheet

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

Emergency telephone number

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

ChemWatch Hazard Ratings

	Min	Max	
Flammability	1	į	
Toxicity	0		
Body Contact	1	1	0 = Minimum 1 = Low
Reactivity	1		2 = Moderate
Chronic	2	1	3 = High 4 = Extreme

Poisons Schedule

Not Applicable

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Classification [1]

Respiratory Sensitizer Category 1

Legend:

1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)



Signal word

Danger

Hazard statement(s)

H334

May cause allergy or asthma symptoms or breathing difficulties if inhaled.

Precautionary statement(s) Prevention

P261	Avoid breathing mist/vapours/spray.
P284	[In case of inadequate ventilation] wear respiratory protection.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501

Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
101-68-8	<1	4,4'-diphenylmethane diisocyanate (MDI)

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: Number 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, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary. Following uptake by inhalation, move person to an area free from risk of further exposure. Oxygen or artificial respiration should be administered as needed. Asthmatic-type symptoms may develop and may be immediate or delayed up to several hours. Treatment is essentially symptomatic. A physician should be consulted.
Ingestion	 Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

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Indication of any immediate medical attention and special treatment needed

For sub-chronic and chronic exposures to isocyanates:

- This material may be a potent pulmonary sensitiser which causes bronchospasm even in patients without prior airway hyperreactivity.
- Clinical symptoms of exposure involve mucosal irritation of respiratory and gastrointestinal tracts.
- ▶ Conjunctival irritation, skin inflammation (erythema, pain vesiculation) and gastrointestinal disturbances occur soon after exposure.
- ▶ Pulmonary symptoms include cough, burning, substernal pain and dyspnoea.
- ▶ Some cross-sensitivity occurs between different isocyanates.
- Noncardiogenic pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line.
- Treatment for asthma includes inhaled sympathomimetics (epinephrine [adrenalin], terbutaline) and steroids.
- Activated charcoal (1 g/kg) and a cathartic (sorbitol, magnesium citrate) may be useful for ingestion.
- Mydriatics, systemic analgesics and topical antibiotics (Sulamyd) may be used for corneal abrasions.
- There is no effective therapy for sensitised workers.

[Ellenhorn and Barceloux; Medical Toxicology]

NOTE: Isocyanates cause airway restriction in naive individuals with the degree of response dependant on the concentration and duration of exposure. They induce smooth muscle contraction which leads to bronchoconstrictive episodes. Acute changes in lung function, such as decreased FEV1, may not represent sensitivity.

[Karol & Jin, Frontiers in Molecular Toxicology, pp 56-61, 1992]

Personnel who work with isocyanates, isocyanate prepolymers or polyisocyanates should have a pre-placement medical examination and periodic examinations thereafter, including a pulmonary function test. Anyone with a medical history of chronic respiratory disease, asthmatic or bronchial attacks, indications of allergic responses, recurrent eczema or sensitisation conditions of the skin should not handle or work with isocyanates. Anyone who develops chronic respiratory distress when working with isocyanates should be removed from exposure and examined by a physician. Further exposure must be avoided if a sensitivity to isocyanates or polyisocyanates has developed.

SECTION 5 Firefighting measures

Extinguishing media

- ▶ Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- ► Carbon dioxide
- Water spray or fog Large fires only.

Special hazards arising from the substrate or mixture

Fire Incompatibility

 Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

Advice for firefighters

Advice for in enginers	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water courses. Use water delivered as a fine spray to control fire and cool adjacent area. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	 Combustible. Slight fire hazard when exposed to heat or flame. Heating may cause expansion or decomposition leading to violent rupture of containers. On combustion, may emit toxic fumes of carbon monoxide (CO). May emit acrid smoke. Mists containing combustible materials may be explosive. Combustion products include: carbon monoxide (CO) carbon dioxide (CO2) isocyanates and minor amounts of hydrogen cyanide nitrogen oxides (NOx) other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.
HAZCHEM	Not Applicable

SECTION 6 Accidental release measures

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Personal precautions, protective equipment and emergency procedures

See section 8

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Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Clean up all spills immediately. Avoid contact with skin and eyes. Wear impervious gloves and safety goggles. Trowel up/scrape up. Place spilled material in clean, dry, sealed container. Flush spill area with water.
Major Spills	 For isocyanate spills of less than 40 litres (2 m2): Evacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible. Notify supervision and others as necessary. Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots). Control source of leakage (where applicable). Dike the spill to prevent spreading and to contain additions of decontaminating solution. Prevent the material from entering drains. Estimate spill pool volume or area. Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. DO NOT reseal container if contamination is suspected. Open all containers with care. Minor hazard. Clear area of personnel. Alert Fire Brigade and tell them location and nature of hazard. Control personal contact with the substance, by using protective equipment as required. Prevent spillage from entering drains or water ways. Contain spill with sand, earth or vermiculite. Collect recoverable product into labelled containers for recycling.

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

SECTION 7 Handling and storage

	Avoid all personal contact, including inhalation.
	 Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area.
Safe handling	Prevent concentration in hollows and sumps. 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.
	► Store in original containers.
	▶ Keep containers securely sealed.
Other information	 Store in a cool, dry, well-ventilated area.
Other information	Store away from incompatible materials and foodstuff containers.
	Protect containers against physical damage and check regularly for leaks.
	Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	 Metal can or drum Packaging as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	► Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

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INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate (MDI)	0.02 mg/m3	0.07 mg/m3	Not Available	Not Available

Emergency Limits

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

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

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.

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.

Skin protection

See Hand protection below

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

Hands/feet protection

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 leather items, such as shoes, belts and watch-bands should be removed and destroyed.

Body protection

See Other protection below

Other protection

- Overalls.
- P.V.C apron.Barrier cream.
- Skin cleansing cream.
- ► Eye wash unit.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the

computer-generated selection:

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Material	СРІ
PE/EVAL/PE	Α

* CPI - Chemwatch Performance Index

A: Best Selection

Respiratory protection

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Black paste with characteristic odour; doesnt mix with water.		
Physical state	Non Slump Paste	Relative density (Water = 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	370
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)	208	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	164	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	0.2 (vol)	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	0.1 (vol)	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	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	Product is considered stable and 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	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.

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Skin Contact

There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons. Open cuts, abraded or irritated skin should not be exposed to this material

Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

Eye

There is some evidence to suggest that this material can cause eye irritation and damage in some persons.

Chronic

Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

heo Forch ASK-Standard K105 310 ml	TOXICITY	IRRITATION
	Not Available	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Dermal Sensitiser *
4,4'-diphenylmethane	Oral(Rat) LD50; >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
diisocyanate (MDI)		Skin (rabbit): 500 mg /24 hours
		Skin: adverse effect observed (irritating) ^[1]

Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate

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.

Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.

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

Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as

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.

Theo Forch ASK-Standard K105 310 ml & 4.4'-DIPHENYLMETHANE DIISOCYANATE (MDI)

4.4'-DIPHENYLMETHANE

DIISOCYANATE (MDI)

Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.

Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema. Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.

Acute Toxicity	×	Carcinogenicity	×
Skin Irritation/Corrosion	×	Reproductivity	×
Serious Eye Damage/Irritation	×	STOT - Single Exposure	×
Respiratory or Skin sensitisation	~	STOT - Repeated Exposure	×

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Mutagenicity

Aspiration Hazard

Legend:

★ - Data either not available or does not fill the criteria for classification

Data available to make classification

SECTION 12 Ecological information

Toxicity

i				
ailable	Not Available	Not Available	Not Available	Not Available
dpoint	Test Duration (hr)	Species	Value	Source
50	96	Fish	>1000mg/L	2
50	72	Algae or other aquatic plants	>1640mg/L	2
EC	504	Crustacea	>=10mg/L	2
•	dpoint 50 50 DEC	50 96 50 72	50 96 Fish 50 72 Algae or other aquatic plants	50 96 Fish >1000mg/L 50 72 Algae or other aquatic plants >1640mg/L

3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

DO NOT discharge into sewer or waterways.

Persistence and degradability

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

Bioaccumulative potential

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

Mobility in soil

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

SECTION 13 Disposal considerations

Waste treatment methods

- 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.
- ► DO NOT recycle spilled material.
- ▶ Consult State Land Waste Management Authority for disposal.
- Neutralise spill material carefully and decontaminate empty containers and spill residues with 10% ammonia solution plus detergent or a proprietary decontaminant prior to disposal.
- DO NOT seal or stopper drums being decontaminated as CO2 gas is generated and may pressurise containers.
- Puncture containers to prevent re-use.
- ▶ Bury or incinerate residues at an approved site.

SECTION 14 Transport information

Product / Packaging

disposal

Labels Required

Marine Pollutant

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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

Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group	
4,4'-diphenylmethane diisocyanate (MDI)	Not Available	

Transport in bulk in accordance with the ICG Code

Product name	Ship Type	
4,4'-diphenylmethane diisocyanate (MDI)	Not Available	

SECTION 15 Regulatory information

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

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

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

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

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

Australian Inventory of Industrial Chemicals (AIIC)

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

National Inventory Status

National Inventory	Status		
Australia - AIIC / Australia Non-Industrial Use	Yes		
Canada - DSL	Yes		
Canada - NDSL	No (4,4'-diphenylmethane diisocyanate (MDI))		
China - IECSC	Yes		
Europe - EINEC / ELINCS / NLP	Yes		
Japan - ENCS	Yes		
Korea - KECI	Yes		
New Zealand - NZIoC	Yes		
Philippines - PICCS	Yes		
USA - TSCA	Yes		
Taiwan - TCSI	Yes		
Mexico - INSQ	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	01/11/2019
Initial Date	18/04/2012

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SDS Version Summary

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

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average PC—STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

IDLH: Immediately Dangerous to Life or Health Concentrations

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level

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

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