Ultracolor Aerosol Survey Marker – Fluoro Colours

Zeus Chemical Products

Chemwatch Hazard Alert Code: **4**

Chemwatch: **47249**
Version No: **6.1**
Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Issue Date: **01/11/2019**
Print Date: **14/06/2022**
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SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier

Product name	Ultracolor Aerosol Survey Marker - Fluoro
Chemical Name	Not Applicable
Synonyms	spray paint
Proper shipping name	AEROSOLS
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	Spray paint. Application is by spray atomisation from a hand held aerosol pack Use according to manufacturer's directions.

Details of the supplier of the safety data sheet

Registered company name	**Zeus Chemical Products**
Address	3 Anderson Place South Windsor NSW 2756 Australia
Telephone	+61 2 4577 4866
Fax	+61 2 4577 6919
Website	www.ultracolor.com.au
Email	admin@ultracolor.com.au

Emergency telephone number

Association / Organisation	**Zeus Chemical Products**	**CHEMWATCH EMERGENCY RESPONSE**
Emergency telephone numbers	+61 2 4577 4866 (Mon-Fri, 8am-5pm)	+61 1800 951 288
Other emergency telephone numbers	Not Available	+61 3 9573 3188

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

Poisons Schedule	Not Applicable
Classification [1]	Aerosols Category 1, Acute Toxicity (Oral) Category 4, Aspiration Hazard Category 1, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2A, Specific Target Organ Toxicity - Single Exposure (Narcotic Effects) Category 3, Carcinogenicity Category 1A, Reproductive Toxicity Category 2, 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)

H222+H229	Extremely flammable aerosol. Pressurized container: may burst if heated.
H302	Harmful if swallowed.
H304	May be fatal if swallowed and enters airways.
H315	Causes skin irritation.

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H319	Causes serious eye irritation.
H336	May cause drowsiness or dizziness.
H350	May cause cancer.
H361d	Suspected of damaging the unborn child.
H373	May cause damage to organs through prolonged or repeated exposure.
AUH044	Risk of explosion if heated under confinement.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.
P211	Do not spray on an open flame or other ignition source.
P251	Do not pierce or burn, even after use.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.

Precautionary statement(s) Response

P301+P310	IF SWALLOWED: Immediately call a POISON CENTER/doctor/physician/first aider.
P331	Do NOT induce vomiting.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P337+P313	If eye irritation persists: Get medical advice/attention.
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P330	Rinse mouth.
P332+P313	If skin irritation occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.

Precautionary statement(s) Storage

P405	Store locked up.
P410+P412	Protect from sunlight. Do not expose to temperatures exceeding 50 °C/122 °F.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
75-09-2	30-60	methylene chloride
108-88-3	10-30	toluene
1332-58-7	1-10	kaolin
Not Available	1-10	hydrocarbon resin (aromatic)
Not Available	1-10	fluorescent pigment
68476-85-7.	30-60	hydrocarbon propellant
Not Available		NOTE: Manufacturer has supplied full ingredient
Not Available		information to allow CHEMWATCH assessment.
Legend:	*1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available*	

SECTION 4 First aid measures

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Description of first aid measures

Eye Contact	If aerosols come in contact with the eyes: ▸ Immediately hold the eyelids apart and flush the eye continuously for at least 15 minutes 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. ▸ 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 solids or aerosol mists are deposited upon the skin: ▸ Flush skin and hair with running water (and soap if available). ▸ Remove any adhering solids with industrial skin cleansing cream. ▸ **DO NOT** use solvents. ▸ Seek medical attention in the event of irritation.
Inhalation	If aerosols, fumes or combustion products are inhaled: ▸ Remove to fresh air. ▸ 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. ▸ If breathing is shallow or has stopped, ensure clear airway and apply resuscitation, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▸ Transport to hospital, or doctor.
Ingestion	▸ Avoid giving milk or oils. ▸ Avoid giving alcohol. ▸ Not considered a normal route of entry. ▸ For advice, contact a Poisons Information Centre or a doctor. ▸ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

for intoxication due to Freons/ Halons;
A: Emergency and Supportive Measures
- Maintain an open airway and assist ventilation if necessary
- Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitisation may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.
- Monitor the ECG for 4-6 hours

B: Specific drugs and antidotes:
- There is no specific antidote

C: Decontamination
- Inhalation; remove victim from exposure, and give supplemental oxygen if available.
- Ingestion; (a) Prehospital: Administer activated charcoal, if available. **DO NOT** induce vomiting because of rapid absorption and the risk of abrupt onset CNS depression. (b) Hospital: Administer activated charcoal, although the efficacy of charcoal is unknown. Perform gastric lavage only if the ingestion was very large and recent (less than 30 minutes)

D: Enhanced elimination:
- There is no documented efficacy for diuresis, haemodialysis, haemoperfusion, or repeat-dose charcoal.

POISONING and DRUG OVERDOSE, Californian Poison Control System Ed. Kent R Olson; 3rd Edition
- Do not administer sympathomimetic drugs unless absolutely necessary as material may increase myocardial irritability.
- No specific antidote.
- Because rapid absorption may occur through lungs if aspirated and cause systematic effects, the decision of whether to induce vomiting or not should be made by an attending physician.
- If lavage is performed, suggest endotracheal and/or esophageal control.
- Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach.
- Treatment based on judgment of the physician in response to reactions of the patient

Treat symptomatically.
Following acute or short term repeated exposures to toluene:
- Toluene is absorbed across the alveolar barrier, the blood/air mixture being 11.2/15.6 (at 37 degrees C.) The concentration of toluene, in expired breath, is of the order of 18 ppm following sustained exposure to 100 ppm. The tissue/blood proportion is 1/3 except in adipose where the proportion is 8/10.
- Metabolism by microsomal mono-oxygenation, results in the production of hippuric acid. This may be detected in the urine in amounts between 0.5 and 2.5 g/24 hr which represents, on average 0.8 gm/gm of creatinine. The biological half-life of hippuric acid is in the order of 1-2 hours.
- Primary threat to life from ingestion and/or inhalation is respiratory failure.
- Patients should be quickly evaluated for signs of respiratory distress (eg cyanosis, tachypnoea, intercostal retraction, obtundation) and given oxygen. Patients with inadequate tidal volumes or poor arterial blood gases (pO2 <50 mm Hg or pCO2 > 50 mm Hg) should be intubated.
- Arrhythmias complicate some hydrocarbon ingestion and/or inhalation and electrocardiographic evidence of myocardial damage has been reported; intravenous lines and cardiac monitors should be established in obviously symptomatic patients. The lungs excrete inhaled solvents, so that hyperventilation improves clearance.
- A chest x-ray should be taken immediately after stabilisation of breathing and circulation to document aspiration and detect the presence of pneumothorax.
- Epinephrine (adrenaline) is not recommended for treatment of bronchospasm because of potential myocardial sensitisation to catecholamines. Inhaled cardioselective bronchodilators (e.g. Alupent, Salbutamol) are the preferred agents, with aminophylline a second choice.
- Lavage is indicated in patients who require decontamination; ensure use.

BIOLOGICAL EXPOSURE INDEX - BEI

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

Determinant	Index	Sampling Time	Comments
o-Cresol in urine	0.5 mg/L	End of shift	B
Hippuric acid in urine	1.6 g/g creatinine	End of shift	B, NS
Toluene in blood	0.05 mg/L	Prior to last shift of workweek	

NS: Non-specific determinant; also observed after exposure to other material

B: Background levels occur in specimens collected from subjects NOT exposed

SECTION 5 Firefighting measures

Extinguishing media

SMALL FIRE:
- Water spray, dry chemical or CO2

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LARGE FIRE:
- Water spray or fog.

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

Fire Fighting	▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ May be violently or explosively reactive. ▸ Wear breathing apparatus plus protective gloves. ▸ Prevent, by any means available, spillage from entering drains or water course. ▸ If safe, switch off electrical equipment until vapour fire hazard removed. ▸ 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. ▸ Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	▸ Liquid and vapour are highly flammable. ▸ Severe fire hazard when exposed to heat or flame. ▸ Vapour forms an explosive mixture with air. ▸ Severe explosion hazard, in the form of vapour, when exposed to flame or spark. ▸ Vapour may travel a considerable distance to source of ignition. ▸ Heating may cause expansion or decomposition with violent container rupture. ▸ Aerosol cans may explode on exposure to naked flames. ▸ Rupturing containers may rocket and scatter burning materials. ▸ Hazards may not be restricted to pressure effects. ▸ May emit acrid, poisonous or corrosive fumes. ▸ On combustion, may emit toxic fumes of carbon monoxide (CO). Combustion products include: carbon monoxide (CO) carbon dioxide (CO_2) hydrogen chloride phosgene other pyrolysis products typical of burning organic material. **Contains low boiling substance:** Closed containers may rupture due to pressure buildup under fire conditions.
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	▸ Clean up all spills immediately. ▸ Avoid breathing vapours and contact with skin and eyes. ▸ Wear protective clothing, impervious gloves and safety glasses. ▸ Shut off all possible sources of ignition and increase ventilation. ▸ Wipe up. ▸ If safe, damaged cans should be placed in a container outdoors, away from all ignition sources, until pressure has dissipated. ▸ Undamaged cans should be gathered and stowed safely.
Major Spills	▸ **DO NOT** exert excessive pressure on valve; **DO NOT** attempt to operate damaged valve. ▸ Clear area of personnel and move upwind. ▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ May be violently or explosively reactive. ▸ Wear breathing apparatus plus protective gloves. ▸ Prevent, by any means available, spillage from entering drains or water courses ▸ No smoking, naked lights or ignition sources. ▸ Increase ventilation. ▸ Stop leak if safe to do so. ▸ Water spray or fog may be used to disperse / absorb vapour. ▸ Absorb or cover spill with sand, earth, inert materials or vermiculite. ▸ If safe, damaged cans should be placed in a container outdoors, away from ignition sources, until pressure has dissipated. ▸ Undamaged cans should be gathered and stowed safely. ▸ Collect residues and seal in labelled drums for disposal. ▸ Remove leaking cylinders to a safe place if possible. ▸ Release pressure under safe, controlled conditions by opening the valve.

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.

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	▸ Avoid smoking, naked lights or ignition sources. ▸ Avoid contact with incompatible materials. ▸ When handling, **DO NOT** eat, drink or smoke. ▸ **DO NOT** incinerate or puncture aerosol cans. ▸ **DO NOT** spray directly on humans, exposed food or food utensils. ▸ Avoid physical damage to containers. ▸ Always wash hands with soap and water after handling. ▸ Work clothes should be laundered separately. ▸ 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 below 38 deg. C. ▸ Keep dry to avoid corrosion of cans. Corrosion may result in container perforation and internal pressure may eject contents of can ▸ Store in original containers in approved flammable liquid storage area. ▸ **DO NOT** store in pits, depressions, basements or areas where vapours may be trapped. ▸ No smoking, naked lights, heat or ignition sources. ▸ Keep containers securely sealed. Contents under pressure. ▸ Store away from incompatible materials. ▸ Store in a cool, dry, well ventilated area. ▸ Avoid storage at temperatures higher than 40 deg C. ▸ Store in an upright position. ▸ Protect containers against physical damage. ▸ Check regularly for spills and leaks. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	▸ **DO NOT** use aluminium or galvanised containers ▸ Aerosol dispenser. ▸ Check that containers are clearly labelled.
Storage incompatibility	Methylene chloride ▸ is a combustible liquid under certain circumstances even though there is no measurable flash point and it is difficult to ignite ▸ its is flammable in ambient air in the range 12-23%; increased oxygen content can greatly enhance fire and explosion potential ▸ contact with hot surfaces and elevated temperatures can form fumes of hydrogen chloride and phosgene ▸ reacts violently with active metals, aluminium, lithium, methanol,, peroxydisulfuryl difluoride, potassium, potassium tert-butoxide, sodium ▸ forms explosive mixtures with nitric acid ▸ is incompatible with strong oxidisers, strong caustics, alkaline earths and alkali metals ▸ attacks some plastics, coatings and rubber ▸ may generate electrostatic charge due to low conductivity ▸ Avoid reaction with oxidising agents

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	methylene chloride	Methylene chloride	50 ppm / 174 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	toluene	Toluene	50 ppm / 191 mg/m3	574 mg/m3 / 150 ppm	Not Available	Not Available
Australia Exposure Standards	kaolin	Kaolin	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	hydrocarbon propellant	LPG (liquified petroleum gas)	1000 ppm / 1800 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
methylene chloride	Not Available	Not Available	Not Available
toluene	Not Available	Not Available	Not Available
hydrocarbon propellant	65,000 ppm	2.30E+05 ppm	4.00E+05 ppm

Ingredient	Original IDLH	Revised IDLH
methylene chloride	2,300 ppm	Not Available
toluene	500 ppm	Not Available
kaolin	Not Available	Not Available
hydrocarbon propellant	2,000 ppm	Not Available

MATERIAL DATA

For kaolin:
Kaolin dust appears to have fibrogenic potential even in the absence of crystalline silica. Kaolinosis can exist as simple and complicated forms with the latter often associated with respiratory symptoms. Crystalline silica enhances the severity of the pneumoconiosis.
For methylene chloride
Odour Threshold Value: 158 ppm (detection), 227 ppm (recognition)
NOTE: Detector tubes for methylene chloride, measuring in excess of 25 ppm are commercially available. Long-term measurements (4 hrs) may be conducted to detect concentrations exceeding 13 ppm.
Exposure at or below the recommended TLV-TWA (and in the absence of occupational exposure to carbon monoxide) is thought to minimise the potential for liver injury and to provide protection against the possible weak carcinogenic effects which have been demonstrated in laboratory rats and mice. Enhancement of tumours of the lung, liver, salivary glands and

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mammary tissue in rodent studies has lead NIOSH to recommend a more conservative outcome. The ACGIH however concludes that in the absence of documentation of health-related injuries at higher exposures after a long history of methylene chloride use and a number of epidemiologic studies, the recommended TLV-TWA provides an adequate margin of safety.
Concentration effects:

Concentration	Clinical effects
>300 ppm	Sweet odour
500-1000 ppm (1-2 h)	Unpleasant odour, slight anaesthetic effects, headache, light-headedness, eye irritation and elevated COHb concentration
2300 ppm (5 min.)	Odour strong, intensely irritating; dizziness
7200 ppm (8-16 min)	Paraesthesia, tachycardia
>50000 ppm	Immediately life-threatening

Animals exposed by inhalation to 10 mg/m3 titanium dioxide show no significant fibrosis, possibly reversible tissue reaction. The architecture of lung air spaces remains intact.
· The label on a package containing 1% or more of titanium oxide with aerodynamic diameter equal or below 10 microns shall bear the following statement: EUH211 "Warning! Hazardous respirable droplets may be formed when sprayed. Do NOT breathe spray or mist
· The label on the packaging of solid mixtures containing 1% or more of titanium dioxide shall bear the following statement: EUH212" "Warning! Hazardous respirable dust may be formed when used. Do not breathe dust".
In addition, the label on the packaging of liquid and solid mixtures not intended for the general public and not classified as hazardous which are labelled EUH211 or EU212 shall bear statement EUH210: "Safety data sheet available on request."
For toluene:
Odour Threshold Value: 0.16-6.7 (detection), 1.9-69 (recognition)
NOTE: Detector tubes measuring in excess of 5 ppm, are available.
High concentrations of toluene in the air produce depression of the central nervous system (CNS) in humans. Intentional toluene exposure (glue-sniffing) at maternally-intoxicating concentration has also produced birth defects. Foetotoxicity appears at levels associated with CNS narcosis and probably occurs only in those with chronic toluene-induced kidney failure. Exposure at or below the recommended TLV-TWA is thought to prevent transient headache and irritation, to provide a measure of safety for possible disturbances to human reproduction, the prevention of reductions in cognitive responses reported amongst humans inhaling greater than 40 ppm, and the significant risks of hepatotoxic, behavioural and nervous system effects (including impaired reaction time and incoordination). Although toluene/ethanol interactions are well recognised, the degree of protection afforded by the TLV-TWA among drinkers is not known.
Odour Safety Factor(OSF)
OSF=17 (TOLUENE)

NOTE K: The classification as a carcinogen need not apply if it can be shown that the substance contains less than 0.1%w/w 1,3-butadiene (EINECS No 203-450-8). - European Union (EU) List of harmonised classification and labelling hazardous substances, Table 3.1, Annex VI, Regulation (EC) No 1272/2008 (CLP) - up to the latest ATP

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.

General exhaust is adequate under normal conditions. If risk of overexposure exists, wear SAA approved respirator. Correct fit is essential to obtain adequate protection.
Provide adequate ventilation in warehouse or closed storage areas.
Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Speed:
aerosols, (released at low velocity into zone of active generation)	0.5-1 m/s
direct spray, spray painting in shallow booths, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)

Within each range the appropriate value depends on:

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

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

Personal protection

Eye and face protection

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

Skin protection

See Hand protection below

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Hands/feet protection	▸ No special equipment needed when handling small quantities. ▸ **OTHERWISE:** ▸ For potentially moderate exposures: ▸ Wear general protective gloves, eg. light weight rubber gloves. ▸ For potentially heavy exposures: ▸ Wear chemical protective gloves, eg. PVC. and safety footwear.
Body protection	See Other protection below
Other protection	No special equipment needed when handling small quantities. **OTHERWISE:** ▸ Overalls. ▸ Skin cleansing cream. ▸ Eyewash unit. ▸ Do not spray on hot surfaces. ▸ The clothing worn by process operators insulated from earth may develop static charges far higher (up to 100 times) than the minimum ignition energies for various flammable gas-air mixtures. This holds true for a wide range of clothing materials including cotton. ▸ Avoid dangerous levels of charge by ensuring a low resistivity of the surface material worn outermost. BRETHERICK: Handbook of Reactive Chemical Hazards.

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:
Ultracolor Aerosol Survey Marker - Fluoro

Material	CPI
PE/EVAL/PE	A
PVA	A
TEFLON	B
BUTYL	C
CPE	C
NATURAL RUBBER	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PVC	C
SARANEX-23	C
SARANEX-23 2-PLY	C
VITON	C
VITON/BUTYL	C
VITON/CHLOROBUTYL	C
VITON/NEOPRENE	C

* CPI - Chemwatch Performance Index
A: Best Selection
B: Satisfactory; may degrade after 4 hours continuous immersion
C: Poor to Dangerous Choice for other than short term immersion
NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -
* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

Respiratory protection

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	AX-AUS	-	AX-PAPR-AUS / Class 1
up to 50 x ES	-	AX-AUS / Class 1	-
up to 100 x ES	-	AX-2	AX-PAPR-2 ^

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

- 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	Fluorescent liquid with solvent odour; does not mix with water. Supplied as an aerosol pack. Contents under **PRESSURE**. Contains highly flammable hydrocarbon propellant.

Physical state	Liquid	**Relative density (Water = 1)**	Not Available
Odour	Not Available	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Available
pH (as supplied)	Not Applicable	**Decomposition temperature**	Not Available
Melting point / freezing point (°C)	Not Available	**Viscosity (cSt)**	Not Available
Initial boiling point and boiling range (°C)	Not Available	**Molecular weight (g/mol)**	Not Applicable
Flash point (°C)	-81 propellant	**Taste**	Not Available

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Evaporation rate	Not Available	**Explosive properties**	Not Available
Flammability	HIGHLY FLAMMABLE.	**Oxidising properties**	Not Available
Upper Explosive Limit (%)	Not Available	**Surface Tension (dyn/cm or mN/m)**	Not Available
Lower Explosive Limit (%)	Not Available	**Volatile Component (%vol)**	Not Available
Vapour pressure (kPa)	Not Available	**Gas group**	Not Available
Solubility in water	Immiscible	**pH as a solution (Not Available%)**	Not Applicable
Vapour density (Air = 1)	Not Available	**VOC g/L**	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	▸ Elevated temperatures. ▸ Presence of open flame. ▸ Product is considered stable. ▸ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled

Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.
Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a significant number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
The acute toxicity of inhaled alkylbenzene is best described by central nervous system depression. These compounds may also act as general anaesthetics. Whole body symptoms of poisoning include light-headedness, nervousness, apprehension, a feeling of well-being, confusion, dizziness, drowsiness, ringing in the ears, blurred or double vision, vomiting and sensations of heat, cold or numbness, twitching, tremors, convulsions, unconsciousness, depression of breathing, and arrest. Heart stoppage may result from cardiovascular collapse. A slow heart rate and low blood pressure may also occur.
Alkylbenzenes are not generally toxic except at high levels of exposure. Their breakdown products have low toxicity and are easily eliminated from the body.

Common, generalised symptoms associated with toxic gas inhalation include:
- central nervous system effects such as depression, headache, confusion, dizziness, progressive stupor, coma and seizures;
- respiratory system complications may include acute pulmonary oedema, dyspnoea, stridor, tachypnoea, bronchospasm, wheezing and other reactive airway symptoms, and respiratory arrest;
- cardiovascular effects may include cardiovascular collapse, arrhythmias and cardiac arrest;
- gastrointestinal effects may also be present and may include mucous membrane irritation, nausea and vomiting (sometimes bloody), and abdominal pain.

Inhalation hazard is increased at higher temperatures.
Central nervous system (CNS) depression may include nonspecific discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal.

Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure.
Acute effects from inhalation of high concentrations of vapour are pulmonary irritation, including coughing, with nausea; central nervous system depression - characterised by headache and dizziness, increased reaction time, fatigue and loss of co-ordination
WARNING:Intentional misuse by concentrating/inhaling contents may be lethal.

High inhaled concentrations of mixed hydrocarbons may produce narcosis characterised by nausea, vomiting and lightheadedness. Inhalation of aerosols may produce severe pulmonary oedema, pneumonitis and pulmonary haemorrhage. Inhalation of petroleum hydrocarbons consisting substantially of low molecular weight species (typically C2-C12) may produce irritation of mucous membranes, incoordination, giddiness, nausea, vertigo, confusion, headache, appetite loss, drowsiness, tremors and anaesthetic stupor. Massive exposures may produce central nervous system depression with sudden collapse and deep coma; fatalities have been recorded. Irritation of the brain and/or apnoeic anoxia may produce convulsions. Although recovery following overexposure is generally complete, cerebral micro-haemorrhage of focal post-inflammatory scarring may produce epileptiform seizures some months after the exposure. Pulmonary episodes may include chemical pneumonitis with oedema and haemorrhage. The lighter hydrocarbons may produce kidney and neurotoxic effects. Pulmonary irritancy increases with carbon chain length for paraffins and olefins. Alkenes produce pulmonary oedema at high concentrations. Liquid paraffins may produce anaesthesia and depressant actions leading to weakness, dizziness, slow and shallow respiration, unconsciousness, convulsions and death. C5-7 paraffins may also produce polyneuropathy. Aromatic hydrocarbons accumulate in lipid rich tissues (typically the brain, spinal cord and peripheral nerves) and may produce functional impairment manifested by nonspecific symptoms such as nausea, weakness, fatigue and vertigo; severe exposures may produce inebriation or unconsciousness. Many of the petroleum hydrocarbons are cardiac sensitisers and may cause ventricular fibrillations.
Acute intoxication by halogenated aliphatic hydrocarbons appears to take place over two stages. Signs of a reversible narcosis are evident in the first stage and in the second stage signs of injury to organs may become evident, a single organ alone is (almost) never involved.
Inhalation exposure may cause susceptible individuals to show change in heart beat rhythm i.e. cardiac arrhythmia. Exposures must be

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	terminated. Hydrocarbons may sensitise the heart to adrenalin and other circulatory catecholamines; as a result cardiac arrhythmias and ventricular fibrillation may occur. Abrupt collapse may produce traumatic injury. Central nervous system (CNS) depression may be evident early. Symptoms of moderate poisoning may include giddiness, headache, dizziness and nausea. Serious poisonings may result in respiratory depression and may be fatal. The paraffin gases C1-4 are practically non-toxic below their lower flammability limits (18000-50000 ppm). Above this level, incidental effects include CNS depression and irritation but these are reversible upon cessation of the exposure. The C3 and iso-C5 hydrocarbons show increasing narcotic properties; branching of the chain also enhances the effect. The C4 hydrocarbons appear to be more highly neurotoxic than the C3 and C5 members. Several fatalities due to voluntary inhalation of butane have been reported, possibly due to central, respiratory and circulatory effects resulting from anaesthesia, laryngeal oedema, chemical pneumonia or the combined effects of cardiac toxicity and increased sympathomimetic effects. Inhalation of petroleum gases may produce narcosis, due in part to olefinic impurities. Displacement of oxygen in the air may cyanosis. If present in sufficient quantity these gases may reduce the oxygen level to below 18% producing asphyxiation. Symptoms include rapid respiration, mental dullness, lack of coordination, poor judgement, nausea and vomiting. The onset of cyanosis may lead to unconsciousness and death.
Ingestion	Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. Not normally a hazard due to physical form of product. Considered an unlikely route of entry in commercial/industrial environments Considered an unlikely route of entry in commercial/industrial environments. The liquid may produce gastrointestinal discomfort and may be harmful if swallowed. Ingestion may result in nausea, pain and vomiting. Vomit entering the lungs by aspiration may cause potentially lethal chemical pneumonitis
Skin Contact	The material produces severe skin irritation; evidence exists, or practical experience predicts, that the material either: ▸ produces severe inflammation of the skin in a substantial number of individuals following direct contact, and/or ▸ produces significant and severe 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. **NOTE:** Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration. Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. Spray mist may produce discomfort 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	Direct contact with the eye may not cause irritation because of the extreme volatility of the gas; however concentrated atmospheres may produce irritation after brief exposures.. Evidence exists, or practical experience predicts, that the material may cause severe eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Eye contact may cause significant inflammation with pain. Corneal injury may occur; permanent impairment of vision may result unless treatment is prompt and adequate. Repeated or prolonged exposure to irritants may cause inflammation characterised by a temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur. The liquid produces a high level of eye discomfort and is capable of causing pain and severe conjunctivitis. Corneal injury may develop, with possible permanent impairment of vision, if not promptly and adequately treated.
Chronic	On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment. 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 cause concerns for humans owing to possible developmental toxic effects, generally on the basis that results in appropriate animal studies provide strong suspicion of developmental toxicity in the absence of signs of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not a secondary non-specific consequence of other toxic effects. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There is some evidence to provide a presumption that human exposure to the material may result in impaired fertility on the basis of: some evidence in animal studies of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects but which is not a secondary non-specific consequence of other toxic effects. Principal route of occupational exposure to the gas is by inhalation. The health hazards associated with bentonite, kaolin, and common clay, which are commercially important clay products, as well as the related phyllosilicate minerals montmorillonite, kaolinite, and illite, have an extensive literature. Fibrous clay minerals, such as sepiolite, attapulgite, and zeolites, have a separate literature. The biological effects of clay minerals are influenced by their mineral composition and particle size. The decreasing rank order of the potencies of quartz, kaolinite, and montmorillonite to produce lung damage is consistent with their known relative active surface areas and surface chemistry. Clays are chemically all described as aluminosilicates; these are further classified as bentonite, kaolin and common clays. Bentonite is a rock formed of highly colloidal and plastic clays composed mainly of montmorillonite, a clay mineral of the smectite group. Kaolin or china clay is a mixture of different minerals. Its main component is kaolinite; in addition, it frequently contains quartz, mica, feldspar, illite, and montmorillonite. The main components of common clay and shale are illite and chlorite. Illite is also a component of ball clays. Illite closely resembles micas, From the limited data available from studies on bentonite-exposed persons, retained montmorillonite appears to effect only mild nonspecific tissue changes, which are similar to those that have been described in the spectrum of changes of the “small airways mineral dust disease” (nodular peribronchiolar dust accumulations containing refractile material [montmorillonite] in association with limited interstitial fibrosis). In some of the studies, radiological abnormalities have also been reported Long-term occupational exposures to bentonite dust may cause structural and functional damage to the lungs. However, available data are inadequate to conclusively establish a dose-response relationship or even a cause-and-effect relationship due to limited information on period and intensity of exposure and to confounding factors, such as exposure to silica and tobacco smoke. Long-term exposure to kaolin may lead to a relatively benign pneumoconiosis, in an exposure-related fashion. known as kaolinosis. Deterioration of lung function has been observed only in cases with prominent radiological alterations. Based on data from china clay workers in the United Kingdom, it can be very roughly estimated that kaolin is at least an order of magnitude less potent than quartz.. Clearcut deterioration of respiratory function and related symptoms have been reported only in cases with prominent radiological findings.

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The composition of the clay - i.e., quantity and quality of minerals other than kaolinite — is an important determinant of the effects. Bentonite, kaolin, and other clays often contain quartz, and exposure to quartz is causally related to silicosis and lung cancer. Statistically significant increases in the incidence of or mortality from chronic bronchitis and pulmonary emphysema have been reported after exposure to quartz.
The removal of clay particles from the lungs takes place by solubilisation in situ and by physical clearance.
In humans, there was a rapid initial clearance of 8% and 40% of aluminosilicate particles that were, respectively, 1.9 and 6.1 um in aerodynamic diameter from the lung region over 6 days. Thereafter, 4% and 11% of the two particle sizes were removed following a halftime of 20 days, and the rest with half-times of 330 and 420 days.
Ultrafine particles (<100 nm) have a high deposition in the nasal area; they can penetrate the alveolar/capillary barrier. Epidemiological studies have indicated an increase in morbidity and mortality associated with an increase in airborne particulate matter, particularly in the ultrafine size range
An important determinant of the toxicity of clays is the content of quartz. The presence of quartz in the clays studied hampers reliable independent estimation of the fibrogenicity of other components of clays.
Single intratracheal injection into rodents of bentonite and montmorillonite with low content of quartz produced dose- and particle size-dependent cytotoxic effects, as well as transient local inflammation, the signs of which included oedema and, consequently, increased lung weight. After high doses of intratracheal kaolin (containing 8-65% quartz), fibrosis has been described in some studies, whereas at lower kaolin doses, no fibrosis has been observed in the few available studies.
There are limited data on the effects of multiple exposures of experimental animals to montmorillonite or bentonite. Mice maintained on diets containing 10% or 25% bentonite but otherwise adequate to support normal growth displayed slightly reduced growth rates, whereas mice maintained on a similar diet with 50% bentonite showed minimal growth and developed fatty livers and eventually fibrosis of the liver and benign hepatomas.
In vitro studies of the effects of bentonite on a variety of mammalian cell types usually indicated a high degree of cytotoxicity. Concentrations below 1.0 mg/ml of bentonite and montmorillonite particles less than 5 um in diameter caused membrane damage and even cell lysis, as well as functional changes in several types of cells.
No adequate studies are available on the carcinogenicity of bentonite. In an inhalation study and in a study using intrapleural injection, kaolin did not induce tumours in rats. No studies are available on the genotoxicity of clays.
Single, very limited studies did not demonstrate developmental toxicity in rats after oral exposure to bentonite or kaolin.
Chronic dust inhalation of kaolin, as experienced in mineral extraction, has caused kaolinosis with heavy lung marking, emphysema, and nodular pneumoconiosis.
Evidence of kaolinosis (pneumoconiosis) was found in 9% of 553 Cornish china clay workers who had been exposed to kaolin dust for periods exceeding 5 years, whereas no kaolinosis was observed in workers exposed for less than 5 years. Workers in more heavily exposed jobs of milling, bagging and loading showed a prevalence of kaolinosis rising from 6% in those within between 5 and 15 years exposure to 23% in those exposed for more than 15 years. Workers intermittently and less heavily exposed in the older, outdated drying plants required 25 years of massive exposure before reaching the highest prevalence of 17%. Massive fibrosis was seen in four workers, and six workers needed antituberculosis chemotherapy. Preventative measures instituted include preemployment chest examination and approaches to the problem of dust control.
Sheer, G.; Brit. Jnl. Ind. Med. 21, pp 218-225, 1964
Repeated or prolonged exposure to mixed hydrocarbons may produce narcosis with dizziness, weakness, irritability, concentration and/or memory loss, tremor in the fingers and tongue, vertigo, olfactory disorders, constriction of visual field, paraesthesias of the extremities, weight loss and anaemia and degenerative changes in the liver and kidney. Chronic exposure by petroleum workers, to the lighter hydrocarbons, has been associated with visual disturbances, damage to the central nervous system, peripheral neuropathies (including numbness and paraesthesias), psychological and neurophysiological deficits, bone marrow toxicities (including hypoplasia possibly due to benzene) and hepatic and renal involvement. Chronic dermal exposure to petroleum hydrocarbons may result in defatting which produces localised dermatoses. Surface cracking and erosion may also increase susceptibility to infection by microorganisms. One epidemiological study of petroleum refinery workers has reported elevations in standard mortality ratios for skin cancer along with a dose-response relationship indicating an association between routine workplace exposure to petroleum or one of its constituents and skin cancer, particularly melanoma. Other studies have been unable to confirm this finding.
Hydrocarbon solvents are liquid hydrocarbon fractions derived from petroleum processing streams, containing only carbon and hydrogen atoms, with carbon numbers ranging from approximately C5-C20 and boiling between approximately 35-370 deg C. Many of the hydrocarbon solvents have complex and variable compositions with constituents of 4 types, alkanes (normal paraffins, isoparaffins, and cycloparaffins) and aromatics (primarily alkylated one- and two-ring species). Despite the compositional complexity, most hydrocarbon solvent constituents have similar toxicological properties, and the overall toxicological hazards can be characterized in generic terms. Hydrocarbon solvents can cause chemical pneumonitis if aspirated into the lung, and those that are volatile can cause acute CNS effects and/or ocular and respiratory irritation at exposure levels exceeding occupational recommendations. Otherwise, there are few toxicologically important effects. The exceptions, n-hexane and naphthalene, have unique toxicological properties

Animal studies:
No deaths or treatment related signs of toxicity were observed in rats exposed to light alkylate naphtha (paraffinic hydrocarbons) at concentrations of 668, 2220 and 6646 ppm for 6 hrs/day, 5 days/wk for 13 weeks. Increased liver weights and kidney toxicity (male rats) was observed in high dose animals. Exposure to pregnant rats at concentrations of 137, 3425 and 6850 ppm did not adversely affect reproduction or cause maternal or foetal toxicity. Lifetime skin painting studies in mice with similar naphthas have shown weak or no carcinogenic activity following prolonged and repeated exposure. Similar
naphthas/distillates, when tested at nonirritating dose levels, did not show any significant carcinogenic activity indicating that this tumorigenic response is likely related to chronic irritation and not to dose. The mutagenic potential of naphthas has been reported to be largely negative in a variety of mutagenicity tests. The exact relationship between these results and human health is not known. Some components of this product have been shown to produce a species specific, sex hormonal dependent kidney lesion in male rats from repeated oral or inhalation exposure. Subsequent research has shown that the kidney damage develops via the formation of a alpha-2u-globulin, a mechanism unique to the male rat. Humans do not form alpha-2u-globulin, therefore, the kidney effects resulting from this mechanism are not relevant in human.
Methylene chloride is stored in body fat and is metabolised to carbon monoxide which increases and sustains carboxyhaemoglobin levels in the blood, reducing its oxygen carrying capacity. Smokers with already high carboxyhaemoglobin levels may show increased effects of exposure. Methylene chloride exposures cause liver and kidney damage in animals and this justifies consideration before exposing persons with a history of impaired liver function and/or renal disorders.
Chronic exposure may produce central nervous system damage including confusion, delusions, slurred speech, memory impairment, anxiety, focal seizures, encephalopathy and visual and auditory hallucinations. These effects are probably due to chronic carbon monoxide poisoning resulting from methylene chloride metabolism.
Two epidemiological studies of workers exposed to methylene chloride have been published. An excess in pancreatic tumours was noted in one study. Chronic exposure to methylene chloride (approximately 30-120 ppm TWA) did not appear to increase the risk of deaths arising from lung cancer or cardiovascular disease. A study from Zeneca's Central Toxicology Laboratory added further support to the claim that solvent methylene chloride is not a human carcinogen. This study supported a previous finding by the European Centre of Ecology and Toxicology (ECETOC) that methylene chloride induced-cancers, previously identified in mice, were a consequence of a unique metabolic pathway found only in mice.

Ultracolor Aerosol Survey Marker - Fluoro	TOXICITY	IRRITATION
	Not Available	Not Available

methylene chloride	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg[2]	Eye(rabbit): 162 mg - moderate

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	Inhalation(Rat) LC50; 76 mg/L4h[2]	Eye(rabbit): 500 mg/24hr - mild
	Oral (Rat) LD50; 1600 mg/kg[2]	Skin (rabbit): 100mg/24hr-moderate
		Skin (rabbit): 810 mg/24hr-SEVERE

toluene	**TOXICITY**	**IRRITATION**
	Dermal (rabbit) LD50: 12124 mg/kg[2]	Eye (rabbit): 2mg/24h - SEVERE
	Inhalation(Rat) LC50; >13350 ppm4h[2]	Eye (rabbit):0.87 mg - mild
	Oral (Rat) LD50; 636 mg/kg[2]	Eye (rabbit):100 mg/30sec - mild
		Eye: adverse effect observed (irritating)[1]
		Skin (rabbit):20 mg/24h-moderate
		Skin (rabbit):500 mg - moderate
		Skin: adverse effect observed (irritating)[1]
		Skin: no adverse effect observed (not irritating)[1]

kaolin	**TOXICITY**	**IRRITATION**
	Not Available	Not Available

hydrocarbon propellant	**TOXICITY**	**IRRITATION**
	Inhalation(Rat) LC50; 658 mg/l4h[2]	Not Available

Legend:	*1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances*

METHYLENE CHLORIDE	Inhalation (human) TCLo: 500 ppm/ 1 y - I Eye(rabbit): 10 mg - mild **WARNING:** This substance has been classified by the IARC as Group 2A: Probably Carcinogenic to Humans.
TOLUENE	The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.
KAOLIN	for bentonite clays: Bentonite (CAS No. 1302-78-9) consists of a group of clays formed by crystallisation of vitreous volcanic ashes that were deposited in water. The expected acute oral toxicity of bentonite in humans is very low (LD50>15 g/kg). However, severe anterior segment inflammation, uveitis and retrocorneal abscess from eye exposure were reported when bentonite had been used as a prophypaste. In a 33 day dietary (2 and 6%) and a 90 day dietary (1, 3 and 5%) studies in chickens, no changes in behaviour, overall state, clinical and biochemical parameters and electrolytic composition of the blood. Repeat dietary administration of bentonite did not affect calcium or phosphorus metabolism. However, larger amounts caused decreased growth, muscle weakness, and death with marked changes in both calcium and phosphorus metabolism. Bentonite did not cause fibrosis after 1 year exposure of 60 mg dust (<5 um) in a rat study. However, in a second rat study, where 5 um particles were intratracheally instilled at 5, 15 and 45 mg/rat, dose-related fibrosis was observed. Bentonite clay dust is believed to be responsible for bronchial asthma in workers at a processing plant in USA. Ingestion of bentonite without adequate liquids may result in intestinal obstruction in humans. Hypokalaemia and microcytic iron-deficiency anaemia may occur in patients after repeat doses of clay. Chronic ingestion has been reported to cause myositis.
HYDROCARBON PROPELLANT	for Petroleum Hydrocarbon Gases: In many cases, there is more than one potentially toxic constituent in a refinery gas. In those cases, the constituent that is most toxic for a particular endpoint in an individual refinery stream is used to characterize the endpoint hazard for that stream. The hazard potential for each mammalian endpoint for each of the petroleum hydrocarbon gases is dependent upon each petroleum hydrocarbon gas constituent endpoint toxicity values (LC50, LOAEL, etc.) and the relative concentration of the constituent present in that gas. It should also be noted that for an individual petroleum hydrocarbon gas, the constituent characterizing toxicity may be different for different mammalian endpoints, again, being dependent upon the concentration of the different constituents in each, distinct petroleum hydrocarbon gas. All Hydrocarbon Gases Category members contain primarily hydrocarbons (i.e., alkanes and alkenes) and occasionally asphyxiant gases like hydrogen. The inorganic components of the petroleum hydrocarbon gases are less toxic than the C1 - C4 and C5 - C6 hydrocarbon components to both mammalian and aquatic organisms. Unlike other petroleum product categories (*e.g.* gasoline, diesel fuel, lubricating oils, etc.), the inorganic and hydrocarbon constituents of hydrocarbon gases can be evaluated for hazard individually to then predict the screening level hazard of the Category members **Acute toxicity:** No acute toxicity LC50 values have been derived for the C1 -C4 and C5- C6 hydrocarbon (HC) fractions because no mortality was observed at the highest exposure levels tested (~ 5 mg/l) for these petroleum hydrocarbon gas constituents. The order of acute toxicity of petroleum hydrocarbon gas constituents from most to least toxic is: C5-C6 HCs (LC50 > 1063 ppm) > C1-C4 HCs (LC50 > 10,000 ppm) > benzene (LC50 = 13,700 ppm) > butadiene (LC50 = 129,000 ppm) > asphyxiant gases (hydrogen, carbon dioxide, nitrogen). **Repeat dose toxicity:** With the exception of the asphyxiant gases, repeated dose toxicity has been observed in individual selected petroleum hydrocarbon gas constituents. Based upon LOAEL values, the order of order of repeated-dose toxicity of these constituents from most toxic to the least toxic is: Benzene (LOAEL .>=10 ppm) >C1-C4 HCs (LOAEL = 5,000 ppm; assumed to be 100% 2-butene) > C5-C6 HCs (LOAEL = 6,625 ppm) > butadiene (LOAEL = 8,000 ppm) > asphyxiant gases (hydrogen, carbon dioxide, nitrogen). **Genotoxicity:** ***In vitro:*** The majority of the Petroleum Hydrocarbon Gases Category components are negative for *in vitro* genotoxicity. The exceptions are: benzene and 1,3-butadiene, which are genotoxic in bacterial and mammalian *in vitro* test systems. ***In vivo:*** The majority of the Petroleum Hydrocarbon Gases Category components are negative for *in vivo* genotoxicity**.** The exceptions are benzene and 1,3-butadiene, which are genotoxic in *in vivo* test systems **Developmental toxicity:** Developmental effects were induced by two of the petroleum hydrocarbon gas constituents, benzene and the C5 -C6 hydrocarbon fraction. No developmental toxicity was observed at the highest exposure levels tested for the other petroleum hydrocarbon gas constituents tested for this effect. The asphyxiant gases have not been tested for developmental toxicity. Based on LOAEL and NOAEL values, the order of acute toxicity of these constituents from most to least toxic is: Benzene (LOAEL = 20 ppm) > butadiene (NOAEL .>=1,000 ppm) > C5-C6 HCs (LOAEL = 3,463 ppm) > C1-C4 HCs (NOAEL >=5,000 ppm; assumed to be 100% 2-butene) > asphyxiant gases (hydrogen, carbon dioxide, nitrogen)**.**

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	Reproductive toxicity: Reproductive effects were induced by only two petroleum hydrocarbon gas constituents, benzene and isobutane (a constituent of the the C1-C4 hydrocarbon fraction). No reproductive toxicity was observed at the highest exposure levels tested for the other petroleum hydrocarbon gas constituents tested for this effect. The asphyxiant gases have not been tested for reproductive toxicity. Based on LOAEL and NOAEL values, the order of reproductive toxicity of these constituents from most to least toxic is: Benzene (LOAEL = 300 ppm) > butadiene (NOAEL .>=6,000 ppm) > C5-C6 HCs (NOAEL .>=6,521 ppm) > C1-C4 HCs (LOAEL = 9,000 ppm; assumed to be 100% isobutane) > asphyxiant gases (hydrogen, carbon dioxide, nitrogen)
Ultracolor Aerosol Survey Marker – Fluoro **& KAOLIN & HYDROCARBON PROPELLANT**	No significant acute toxicological data identified in literature search.
Ultracolor Aerosol Survey Marker – Fluoro **& METHYLENE CHLORIDE**	The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may produce severe 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) thickening of the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.
Ultracolor Aerosol Survey Marker – Fluoro **& TOLUENE**	For toluene: **Acute Toxicity** Humans exposed to intermediate to high levels of toluene for short periods of time experience adverse central nervous system effects ranging from headaches to intoxication, convulsions, narcosis, and death. Similar effects are observed in short-term animal studies. **Humans -** Toluene ingestion or inhalation can result in severe central nervous system depression, and in large doses, can act as a narcotic. The ingestion of about 60 mL resulted in fatal nervous system depression within 30 minutes in one reported case. Constriction and necrosis of myocardial fibers, markedly swollen liver, congestion and haemorrhage of the lungs and acute tubular necrosis were found on autopsy. Central nervous system effects (headaches, dizziness, intoxication) and eye irritation occurred following inhalation exposure to 100 ppm toluene 6 hours/day for 4 days. Exposure to 600 ppm for 8 hours resulted in the same and more serious symptoms including euphoria, dilated pupils, convulsions, and nausea . Exposure to 10,000-30,000 ppm has been reported to cause narcosis and death Toluene can also strip the skin of lipids causing dermatitis **Animals -** The initial effects are instability and incoordination, lachrymation and sniffles (respiratory exposure), followed by narcosis. Animals die of respiratory failure from severe nervous system depression. Cloudy swelling of the kidneys was reported in rats following inhalation exposure to 1600 ppm, 18-20 hours/day for 3 days **Subchronic/Chronic Effects:** Repeat doses of toluene cause adverse central nervous system effects and can damage the upper respiratory system, the liver, and the kidney. Adverse effects occur as a result from both oral and the inhalation exposures. A reported lowest-observed-effect level in humans for adverse neurobehavioral effects is 88 ppm. **Humans -** Chronic occupational exposure and incidences of toluene abuse have resulted in hepatomegaly and liver function changes. It has also resulted in nephrotoxicity and, in one case, was a cardiac sensitiser and fatal cardiotoxin. Neural and cerebellar dystrophy were reported in several cases of habitual "glue sniffing." An epidemiological study in France on workers chronically exposed to toluene fumes reported leukopenia and neutropenia. Exposure levels were not given in the secondary reference; however, the average urinary excretion of hippuric acid, a metabolite of toluene, was given as 4 g/L compared to a normal level of 0.6 g/L **Animals -** The major target organs for the subchronic/chronic toxicity of toluene are the nervous system, liver, and kidney. Depressed immune response has been reported in male mice given doses of 105 mg/kg/day for 28 days. Toluene in corn oil administered to F344 male and female rats by gavage 5 days/week for 13 weeks, induced prostration, hypoactivity, ataxia, piloerection, lachrymation, excess salivation, and body tremors at doses 2500 mg/kg. Liver, kidney, and heart weights were also increased at this dose and histopathologic lesions were seen in the liver, kidneys, brain and urinary bladder. The no-observed-adverse effect level (NOAEL) for the study was 312 mg/kg (223 mg/kg/day) and the lowest-observed-adverse effect level (LOAEL) for the study was 625 mg/kg (446 mg/kg/day) . **Developmental/Reproductive Toxicity** Exposures to high levels of toluene can result in adverse effects in the developing human foetus. Several studies have indicated that high levels of toluene can also adversely effect the developing offspring in laboratory animals. **Humans -** Variable growth, microcephaly, CNS dysfunction, attentional deficits, minor craniofacial and limb abnormalities, and developmental delay were seen in three children exposed to toluene in utero as a result of maternal solvent abuse before and during pregnancy **Animals** - Sternebral alterations, extra ribs, and missing tails were reported following treatment of rats with 1500 mg/m3 toluene 24 hours/day during days 9-14 of gestation. Two of the dams died during the exposure. Another group of rats received 1000 mg/m3 8 hours/day during days 1-21 of gestation. No maternal deaths or toxicity occurred, however, minor skeletal retardation was present in the exposed fetuses. CFLP Mice were exposed to 500 or 1500 mg/m3 toluene continuously during days 6-13 of pregnancy. All dams died at the high dose during the first 24 hours of exposure, however none died at 500 mg/m3. Decreased foetal weight was reported, but there were no differences in the incidences of skeletal malformations or anomalies between the treated and control offspring. **Absorption** - Studies in humans and animals have demonstrated that toluene is readily absorbed via the lungs and the gastrointestinal tract. Absorption through the skin is estimated at about 1% of that absorbed by the lungs when exposed to toluene vapor. Dermal absorption is expected to be higher upon exposure to the liquid; however, exposure is limited by the rapid evaporation of toluene . **Distribution** - In studies with mice exposed to radiolabeled toluene by inhalation, high levels of radioactivity were present in body fat, bone marrow, spinal nerves, spinal cord, and brain white matter. Lower levels of radioactivity were present in blood, kidney, and liver. Accumulation of toluene has generally been found in adipose tissue, other tissues with high fat content, and in highly vascularised tissues . **Metabolism** - The metabolites of inhaled or ingested toluene include benzyl alcohol resulting from the hydroxylation of the methyl group. Further oxidation results in the formation of benzaldehyde and benzoic acid. The latter is conjugated with glycine to yield hippuric acid or reacted with glucuronic acid to form benzoyl glucuronide. o-cresol and p-cresol formed by ring hydroxylation are considered minor metabolites **Excretion -** Toluene is primarily (60-70%) excreted through the urine as hippuric acid. The excretion of benzoyl glucuronide accounts for 10-20%, and excretion of unchanged toluene through the lungs also accounts for 10-20%. Excretion of hippuric acid is usually complete within 24 hours after exposure.

Acute Toxicity	✔	**Carcinogenicity**	✔
Skin Irritation/Corrosion	✔	**Reproductivity**	✔
Serious Eye Damage/Irritation	✔	**STOT - Single Exposure**	✔
Respiratory or Skin sensitisation	✘	**STOT - Repeated Exposure**	✔
Mutagenicity	✘	**Aspiration Hazard**	✔

Legend: ✘ *– Data either not available or does not fill the criteria for classification*
✔ *– Data available to make classification*

SECTION 12 Ecological information

Continued...

Toxicity

Ultracolor Aerosol Survey Marker - Fluoro

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

methylene chloride

Endpoint	Test Duration (hr)	Species	Value	Source
EC50(ECx)	96h	Algae or other aquatic plants	0.98mg/l	4
BCF	1008h	Fish	2-5.4	7
EC50	72h	Algae or other aquatic plants	202-286mg/l	4
EC50	48h	Crustacea	150-218mg/l	4
EC50	96h	Algae or other aquatic plants	0.98mg/l	4
LC50	96h	Fish	2-3.3mg/l	4

toluene

Endpoint	Test Duration (hr)	Species	Value	Source
NOEC(ECx)	168h	Crustacea	0.74mg/L	5
EC50	48h	Crustacea	3.78mg/L	5
EC50	96h	Algae or other aquatic plants	>376.71mg/L	4
LC50	96h	Fish	5-35mg/l	4

kaolin

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

hydrocarbon propellant

Endpoint	Test Duration (hr)	Species	Value	Source
EC50(ECx)	96h	Algae or other aquatic plants	7.71mg/l	2
EC50	96h	Algae or other aquatic plants	7.71mg/l	2
LC50	96h	Fish	24.11mg/l	2
EC50(ECx)	96h	Algae or other aquatic plants	7.71mg/l	2
EC50	96h	Algae or other aquatic plants	7.71mg/l	2
LC50	96h	Fish	24.11mg/l	2

Legend: *Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 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*

For Aromatic Substances Series:
Environmental Fate: Large, molecularly complex polycyclic aromatic hydrocarbons, or PAHs, are persistent in the environment longer than smaller PAHs.
Atmospheric Fate: PAHs are 'semi-volatile substances" which can move between the atmosphere and the Earth's surface in repeated, temperature-driven cycles of deposition and volatilization. Terrestrial Fate: BTEX compounds have the potential to move through soil and contaminate ground water, and their vapors are highly flammable and explosive.
Ecotoxicity - Within an aromatic series, acute toxicity increases with increasing alkyl substitution on the aromatic nucleus. The order of most toxic to least in a study using grass shrimp and brown shrimp was dimethylnaphthalenes > methylnaphthalenes >naphthalenes. Anthrcene is a phototoxic PAH. UV light greatly increases the toxicity of anthracene to bluegill sunfish. Biological resources in strong sunlight are at more risk than those that are not. PAHs in general are more frequently associated with chronic risks.
For methylene chloride:
log Kow: 1.25
log Koc: 1.68
log Kom: 1.44
Henry's atm m3 /mol: 2.68E-03
BCF: 5
Environmental fate:
Methylene chloride is a volatile liquid,and tends to volatilise to the atmosphere from water and soil. The half-life of methylene chloride volatilisation from water has been found to be 21 minutes under experimental conditions but actual volatilisation from natural waters will depend on the rate of mixing, wind speed, temperature, and other factors. The Henry's law constant value (H) of 0.002 atm/m3/mol indicates that methylene chloride will volatilise rapidly from moist soil and water surfaces.
Methylene chloride is not strongly sorbed to soils or sediments Based on its low soil organic carbon partitioning coefficient (Koc) of 25, methylene chloride is likely to be very highly mobile in soils and may be expected to leach from soils into groundwater.
Based on a reported log octanol/water partition coefficient (Kow) of 1.3 an estimated bioconcentration factor (BCF) of 2.3 was derived. There is no evidence of biomagnification, but because the estimated BCF is low, significant biomagnification of methylene chloride in aquatic food chains is not expected.
Air: The main degradation pathway for methylene chloride in air is its reaction with photochemically generated hydroxyl radicals. Thus, the atmospheric lifetime of methylene chloride may be predicted from the hydroxyl radical concentration in air and the rate of reaction. Most reported rates for hydroxyl radical reaction with methylene chloride range from 1.0 x10-13 to 1.5 x10-13 cm3/mol/sec, and estimates of average atmospheric hydroxyl radical concentration range from 2.5 x10+5 to 1x10+6 mol/cm3 Using this information, an average atmospheric lifetime for methylene chloride may be calculated to be 130 days. Because this degradation pathway is relatively slow, methylene chloride may become widely dispersed but is not likely to accumulate in the atmosphere. The small amount of methylene chloride which reaches the stratosphere (about 1%) may undergo direct photolytic degradation; however, photolysis in the troposphere is not expected. Reactions of methylene chloride with ozone or other common atmospheric species (e.g., oxygen atoms, chlorine atoms, and nitrate radicals) are not believed to contribute to its breakdown.
Water: Methylene chloride undergoes slow hydrolysis in water. The experimental half-life reported for the hydrolysis reaction, at neutral conditions, is approximately 18 months at 25 C
.
However, the rate of reaction varies greatly with changes in temperature and pH. A hydrolytic half-life of 14 days was reported for methylene chloride in acidic solutions at 80-150 C. This experimental value, when extrapolated to 25 C, is about 700 years. Different mechanisms of hydrolyses may be responsible for these two widely different values.
Both aerobic and anaerobic biodegradation may be an important fate process for methylene chloride in water. Methylene chloride has been observed to undergo degradation at a rapid rate under aerobic conditions. Reported total methylene chloride loss was 100% after 7 days in a static culture flask biodegradability screening test.
Sediment and Soil: The rate of biodegradation was found to be dependent on soil type, substrate concentration, and redox state of the soil. Methylene chloride biodegradation has been reported to occur under both aerobic conditions and anaerobic conditions. The biodegradation of methylene chloride appears to be accelerated by the presence of elevated levels of organic carbon.
Methylene chloride has a low tendency to absorb to soil; therefore, there is a potential for leaching to groundwater. Also, because of the high vapor pressure, volatilisation to air is also a likely fate process from dry soil. Its high Henry s law constant (0.002 atm/m3/mol) indicates that volatilization from moist soil is also likely.
For Toluene:
log Kow : 2.1-3;

Continued...

log Koc : 1.12-2.85;
Koc : 37-260;
log Kom : 1.39-2.89;
Half-life (hr) air : 2.4-104;
Half-life (hr) H2O surface water : 5.55-528;
Half-life (hr) H2O ground : 168-2628;
Half-life (hr) soil : <48-240;
Henry's Pa m3 /mol : 518-694;
Henry's atm m3 /mol : 5.94;
E-03BOD 5 0.86-2.12, 5%COD - 0.7-2.52,21-27%;
ThOD - 3.13 ; BCF - 1.67-380;
log BCF - 0.22-3.28.
Atmospheric Fate: The majority of toluene evaporates to the atmosphere from the water and soil. The main degradation pathway for toluene in the atmosphere is reaction with photochemically produced hydroxyl radicals. The estimated atmospheric half life for toluene is about 13 hours. Toluene is also oxidized by reactions with atmospheric nitrogen dioxide, oxygen, and ozone, but these are minor degradation pathways. Photolysis is not considered a significant degradative pathway for toluene.
Terrestrial Fate: Toluene is moderately retarded by adsorption to soils rich in organic material, therefore, transport to ground water is dependent on soil composition. In unsaturated topsoil containing organic material, it has been estimated that 97% of the toluene is adsorbed to the soil and only about 2% is in the soil-water phase and transported with flowing groundwater. There is little retardation in sandy soils and 2-13% of the toluene was estimated to migrate with flowing water; the remainder was volatilized, biodegraded, or unaccounted for. In saturated deep soils with no soil-air phase, about 48% may be transported with flowing groundwater. In surface soil, volatilization to air is an important fate process for toluene. In the environment, biodegradation of toluene to carbon dioxide occurs with a typical half life of 1-7 days.
Aquatic Fate: An important fate process for toluene is volatilization, the rate of which depends on the amount of turbulence in the surface water. The volatilization of toluene from static water has a half life of 1-16 days, whereas from turbulent water the half life is 5-6 hours. Degradation of toluene in surface water occurs primarily by biodegradation with a half life of less than one day under favorable conditions (presence of microorganisms, microbial adaptation, and optimum temperature). Biodegradation also occurs in shallow groundwater and in salt water (at a reduced rate). No data are available on anaerobic degradation of toluene in deep ground water conditions where aerobic degradation would be minimal.
Ecotoxicity: Bioaccumulation in the food chain is predicted to be low. Toluene has moderate acute toxicity to aquatic organisms. Toluene is, on the average, slightly toxic to fathead minnow, guppies and goldfish and not acutely toxic to bluegill or channel catfish and crab. Toluene, on the average, is slightly toxic to crustaceans specifically, shrimp species including grass shrimp and daggerblade grass shrimp. Toluene has a negative effect on green algae during their growth phase.
DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
methylene chloride	LOW (Half-life = 56 days)	HIGH (Half-life = 191 days)
toluene	LOW (Half-life = 28 days)	LOW (Half-life = 4.33 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
methylene chloride	LOW (BCF = 40)
toluene	LOW (BCF = 90)

Mobility in soil

Ingredient	Mobility
methylene chloride	LOW (KOC = 23.74)
toluene	LOW (KOC = 268)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	▸ **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. ▸ Consult State Land Waste Management Authority for disposal. ▸ Discharge contents of damaged aerosol cans at an approved site. ▸ Allow small quantities to evaporate. ▸ **DO NOT** incinerate or puncture aerosol cans. ▸ Bury residues and emptied aerosol cans at an approved site.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG)

UN number	1950
UN proper shipping name	AEROSOLS

Continued...

Transport hazard class(es)	Class: 2.1 Subrisk: Not Applicable
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	Special provisions: 63 190 277 327 344 381 Limited quantity: 1000ml

Air transport (ICAO-IATA / DGR)

UN number	1950
UN proper shipping name	Aerosols, flammable
Transport hazard class(es)	ICAO/IATA Class: 2.1 ICAO / IATA Subrisk: Not Applicable ERG Code: 10L
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	Special provisions: A145 A167 A802 Cargo Only Packing Instructions: 203 Cargo Only Maximum Qty / Pack: 150 kg Passenger and Cargo Packing Instructions: 203 Passenger and Cargo Maximum Qty / Pack: 75 kg Passenger and Cargo Limited Quantity Packing Instructions: Y203 Passenger and Cargo Limited Maximum Qty / Pack: 30 kg G

Sea transport (IMDG-Code / GGVSee)

UN number	1950
UN proper shipping name	AEROSOLS
Transport hazard class(es)	IMDG Class: 2.1 IMDG Subrisk: Not Applicable
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	EMS Number: F-D, S-U Special provisions: 63 190 277 327 344 381 959 Limited Quantities: 1000 ml

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
methylene chloride	Not Available
toluene	Not Available
kaolin	Not Available
hydrocarbon propellant	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
methylene chloride	Not Available
toluene	Not Available
kaolin	Not Available
hydrocarbon propellant	Not Available

SECTION 15 Regulatory information

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

methylene chloride is found on the following regulatory lists

Continued...

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australian Inventory of Industrial Chemicals (AIIC)
Chemical Footprint Project - Chemicals of High Concern List
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2A: Probably carcinogenic to humans

toluene is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Australian Inventory of Industrial Chemicals (AIIC)
Chemical Footprint Project - Chemicals of High Concern List
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

kaolin is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)
Chemical Footprint Project - Chemicals of High Concern List
International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

hydrocarbon propellant is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australian Inventory of Industrial Chemicals (AIIC)
Chemical Footprint Project - Chemicals of High Concern List

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (methylene chloride; toluene; kaolin; hydrocarbon propellant)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (kaolin)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	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. These ingredients may be exempt or will require registration.*

SECTION 16 Other information

Revision Date	01/11/2019
Initial Date	16/02/2001

SDS Version Summary

Version	Date of Update	Sections Updated
4.1	27/06/2017	Acute Health (eye), Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Advice to Doctor, Appearance, Chronic Health, Classification, Disposal, Engineering Control, Environmental, Exposure Standard, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), Fire Fighter (fire incompatibility), First Aid (eye), First Aid (inhaled), First Aid (swallowed), Personal Protection (other), Personal Protection (Respirator), Personal Protection (eye), Personal Protection (hands/feet), Physical Properties, Spills (major), Storage (storage incompatibility), Storage (storage requirement), Storage (suitable container), Supplier Information, Synonyms, Toxicity and Irritation (Other), Use
6.1	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
ES: Exposure Standard

Continued...

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
AIIC: Australian Inventory of Industrial Chemicals
DSL: Domestic Substances List
NDSL: Non-Domestic Substances List
IECSC: Inventory of Existing Chemical Substance in China
EINECS: European INventory of Existing Commercial chemical Substances
ELINCS: European List of Notified Chemical Substances
NLP: No-Longer Polymers
ENCS: Existing and New Chemical Substances Inventory
KECI: Korea Existing Chemicals Inventory
NZIoC: New Zealand Inventory of Chemicals
PICCS: Philippine Inventory of Chemicals and Chemical Substances
TSCA: Toxic Substances Control Act
TCSI: Taiwan Chemical Substance Inventory
INSQ: Inventario Nacional de Sustancias Químicas
NCI: National Chemical Inventory
FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

end of SDS