

Antas 636 All Purpose MS Adhesive Sealant

Antas Sealants and Adhesives

Part Number: 66636

Version No: 1.2.8.7

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

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

Product Identifier

Product name	Antas 636 All Purpose MS Adhesive Sealant
Chemical Name	Not Applicable
Synonyms	AT636
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	adhesive sealant for construction,
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Details of the supplier of the safety data sheet

Registered company name	Antas Sealants and Adhesives
Address	21-23 Pavesi Street Smithfield NSW 2164 Australia
Telephone	+61 2 9157 0368
Fax	Not Available
Website	www.antas.com.au
Email	info@antas.com.au

Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	+61 2 9157 0368
Other emergency telephone numbers	National Poison Information Centre 13 11 26

SECTION 2 Hazards identification

Classification of the substance or mixture

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

Poisons Schedule	Not Applicable
Classification [1]	Specific target organ toxicity - single exposure Category 2, Serious Eye Damage/Eye Irritation Category 1, Skin Corrosion/Irritation Category 2, Reproductive Toxicity Category 1B, Emit Flammable Gases with Water Category 2, Chronic Aquatic Hazard Category 3
Legend:	1. Classification by vendor; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
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Antas 636 All Purpose MS Adhesive Sealant 7`YUf

Signal word	Danger
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Hazard statement(s)

H371	May cause damage to organs.
H318	Causes serious eye damage.
H315	Causes skin irritation.
H360FD	May damage fertility. May damage the unborn child.
H261	In contact with water releases flammable gases.
H412	Harmful to aquatic life with long lasting effects.

Supplementary statement(s)

Not Applicable

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P231+P232	Handle and store contents under inert gas. Protect from moisture.
P260	Do not breathe mist/vapours/spray.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.
P223	Do not allow contact with water.
P264	Wash all exposed external body areas thoroughly after handling.

Precautionary statement(s) Response

P302+P335+P334	IF ON SKIN: Brush off loose particles from skin. Immerse in cool water [or wrap in wet bandages].
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P370+P378	In case of fire: Use water spray/fog to extinguish.
P308+P311	IF exposed or concerned: Call a POISON CENTER/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water.
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.
P402+P404	Store in a dry place. Store in a closed container.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
25322-69-4	20-60	<u>polypropylene glycol</u>
68611-44-9	0-15	<u>silica amorphous, fumed</u>
2768-02-7	<2	<u>trimethoxyvinylsilane</u>
13822-56-5	<4	<u>3-aminopropyltrimethoxysilane</u>
77-58-7	<0.5	<u>dibutyltin dilaurate</u>

Antas 636 All Purpose MS Adhesive Sealant 7`YUf

Legend:	1. Classification by vendor; 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
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SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Immediately hold eyelids apart and flush the eye continuously with running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▶ Transport to hospital or doctor without delay. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> ▶ Quickly but gently, wipe material off skin with a dry, clean cloth. ▶ Immediately remove all contaminated clothing, including footwear. ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. ▶ Transport to hospital, or doctor.
Inhalation	<ul style="list-style-type: none"> ▶ If fumes or combustion products are inhaled remove from contaminated area. ▶ Lay patient down. Keep warm and rested. ▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▶ Transport to hospital, or doctor, without delay.
Ingestion	<ul style="list-style-type: none"> ▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. ▶ Urgent hospital treatment is likely to be needed. ▶ In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. <p>Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:</p> <ul style="list-style-type: none"> ▶ INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. <p>NOTE: Wear a protective glove when inducing vomiting by mechanical means.</p>

Indication of any immediate medical attention and special treatment needed

for stimulants:

Treatment and Management.

A specific antidote does not exist for acute stimulant intoxication. Activated charcoal should be prescribed in a case of acute overdose. Otherwise the treatment should target specific signs and symptoms such as hypertension, agitation, seizures, and hyperthermia. Rapid supportive treatment may reduce mortality.

Supportive therapy

Acute intoxication usually presents with increased sensitivity to sensorial stimuli and paranoia. As such, decreasing the patient's level of stimulation (keep voice low, dim lights, minimise touch) and working with the patient's paranoid state (reduce eye contact, respect personal space, do not approach from behind) is important.

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

Decontamination with gastric lavage may be appropriate in cases of recent ingestion.

Monitor vital signs and hydrate with intravenous fluids.

Withdrawal related insomnia may be treated with trazodone (75-200 mg), hydroxyzine (25-50 mg), or diphenhydramine (50-100 mg) at bedtime.

Benzodiazepines should be avoided unless the patient is also in detox from alcohol/benzodiazepines/opiates.

Neuroleptics may be used for the symptomatic treatment of psychosis.

Physical restraints may be required in certain cases.

Common withdrawal symptoms may include dysphoria, anxiety, and irritability, decreased energy (manifested as reported fatigue, psychomotor retardation and hypersomnia), hyperphagia, decreased concentration, and paranoia. The withdrawal symptoms are uncomfortable but not life threatening; consequently, no current recommendations for a stimulant-detoxification regimen are available.

Stimulant withdrawal dysphoria is common and does not in itself represent an indication for an antidepressant. However, a thorough assessment (including consideration of an antidepressant) is recommended for persistent (longer than a week) depressive symptoms at a level of moderate or severe or associated with suicidal ideation/attempts.

Medscape

Treat symptomatically.

- Polyethylene glycols are generally poorly absorbed orally and are mostly unchanged by the kidney.
- Dermal absorption can occur across damaged skin (e.g. through burns) leading to increased osmolality, anion gap metabolic acidosis, elevated calcium, low ionised calcium, CNS depression and renal failure.
- Treatment consists of supportive care.

[Ellenhorn and Barceloux: Medical Toxicology]

For acute and short term repeated exposures to methanol:

- Toxicity results from accumulation of formaldehyde/formic acid.
- Clinical signs are usually limited to CNS, eyes and GI tract. Severe metabolic acidosis may produce dyspnea and profound systemic effects which may become intractable. All symptomatic patients should have arterial pH measured. Evaluate airway, breathing and circulation.
- Stabilise obtunded patients by giving naloxone, glucose and thiamine.
- Decontaminate with Ipecac or lavage for patients presenting 2 hours post-ingestion. Charcoal does not absorb well; the usefulness of cathartic is not established.
- Forced diuresis is not effective; haemodialysis is recommended where peak methanol levels exceed 50 mg/dL (this correlates with serum bicarbonate levels below 18 meq/L).
- Ethanol, maintained at levels between 100 and 150 mg/dL, inhibits formation of toxic metabolites and may be indicated when peak methanol levels exceed 20 mg/dL. An intravenous solution of ethanol in D5W is optimal.
- Folate, as leucovorin, may increase the oxidative removal of formic acid. 4-methylpyrazole may be an effective adjunct in the treatment. 8-Phenytoin may be preferable to diazepam for controlling seizure.

[Ellenhorn Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEI

Determinant	Index	Sampling Time	Comment
1. Methanol in urine	15 mg/l	End of shift	B, NS
2. Formic acid in urine	80 mg/gm creatinine	Before the shift at end of workweek	B, NS

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

NS: Non-specific determinant - observed following exposure to other materials.

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
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Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▸ When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles. ▸ When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. ▸ 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. ▸ Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▸ When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles. ▸ When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. <p>Combustible. Will burn if ignited. Combustion products include: , carbon monoxide (CO) ,</p>

	carbon dioxide (CO2) , silicon dioxide (SiO2) , other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.
HAZCHEM	Not Applicable

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<ul style="list-style-type: none"> ▸ Clean up all spills immediately. ▸ Avoid contact with skin and eyes. ▸ Wear impervious gloves and safety goggles. ▸ Trowel up/scrape up. ▸ Place spilled material in clean, dry, sealed container. ▸ Flush spill area with water.
Major Spills	<ul style="list-style-type: none"> ▸ Clear area of personnel and move upwind. ▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ Wear breathing apparatus plus protective gloves. ▸ Prevent, by any means available, spillage from entering drains or water course. ▸ Stop leak if safe to do so. ▸ Contain spill with sand, earth or vermiculite. ▸ Collect recoverable product into labelled containers for recycling. ▸ Neutralise/decontaminate residue (see Section 13 for specific agent). ▸ Collect solid residues and seal in labelled drums for disposal. ▸ Wash area and prevent runoff into drains. ▸ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using. ▸ If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▸ Avoid all personal contact, including inhalation. ▸ Wear protective clothing when risk of exposure occurs. ▸ Use in a well-ventilated area. ▸ Prevent concentration in hollows and sumps. ▸ DO NOT enter confined spaces until atmosphere has been checked. ▸ DO NOT allow material to contact humans, exposed food or food utensils. ▸ Avoid contact with incompatible materials. ▸ When handling, DO NOT eat, drink or smoke. ▸ Keep containers securely sealed when not in use. ▸ Avoid physical damage to containers. ▸ Always wash hands with soap and water after handling. ▸ Work clothes should be laundered separately. Launder contaminated clothing before re-use. ▸ Use good occupational work practice. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS. ▸ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
Other information	<ul style="list-style-type: none"> ▸ Store in original containers. ▸ Keep containers securely sealed. ▸ Store in a cool, dry, well-ventilated area. ▸ Store away from incompatible materials and foodstuff containers. ▸ Protect containers against physical damage and check regularly for leaks. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Metal can or drum ▶ Packaging as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	<p>▶ Glycols and their ethers undergo violent decomposition in contact with 70% perchloric acid. This seems likely to involve formation of the glycol perchlorate esters (after scission of ethers) which are explosive, those of ethylene glycol and 3-chloro-1,2-propanediol being more powerful than glyceryl nitrate, and the former so sensitive that it explodes on addition of water. The substance may be or contains a "metalloid"</p> <p>The following elements are considered to be metalloids; boron, silicon, germanium, arsenic, antimony, tellurium and (possibly) polonium</p> <p>The electronegativities and ionisation energies of the metalloids are between those of the metals and nonmetals, so the metalloids exhibit characteristics of both classes. The reactivity of the metalloids depends on the element with which they are reacting. For example, boron acts as a nonmetal when reacting with sodium yet as a metal when reacting with fluorine. Unlike most metals, most metalloids are amphoteric- that is they can act as both an acid and a base. For instance, arsenic forms not only salts such as arsenic halides, by the reaction with certain strong acid, but it also forms arsenites by reactions with strong bases.</p> <p>Most metalloids have a multiplicity of oxidation states or valences. For instance, tellurium has the oxidation states +2, -2, +4, and +6. Metalloids react like non-metals when they react with metals and act like metals when they react with non-metals.</p> <ul style="list-style-type: none"> ▶ Contact with water liberates highly flammable gases <p>Silicas:</p> <ul style="list-style-type: none"> ▶ react with hydrofluoric acid to produce silicon tetrafluoride gas ▶ react with xenon hexafluoride to produce explosive xenon trioxide ▶ reacts exothermically with oxygen difluoride, and explosively with chlorine trifluoride (these halogenated materials are not commonplace industrial materials) and other fluorine-containing compounds ▶ may react with fluorine, chlorates ▶ are incompatible with strong oxidisers, manganese trioxide, chlorine trioxide, strong alkalis, metal oxides, concentrated orthophosphoric acid, vinyl acetate ▶ may react vigorously when heated with alkali carbonates. ▶ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. ▶ Avoid reaction with oxidising agents



X — Must not be stored together
 0 — May be stored together with specific preventions
 + — May be stored together

Note: Depending on other risk factors, compatibility assessment based on the table above may not be relevant to storage situations, particularly where large volumes of dangerous goods are stored and handled. Reference should be made to the Safety Data Sheets for each substance or article and risks assessed accordingly.

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	dibutyltin dilaurate	Tin, organic compounds (as Sn)	0.1 mg/m3	0.2 mg/m3	Not Available	(g) Some compounds in these groups are classified as carcinogenic or as sensitisers. Check individual classification details on the safety data sheet for information on classification.

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
polypropylene glycol	30 mg/m3	330 mg/m3	2,000 mg/m3
silica amorphous, fumed	18 mg/m3	100 mg/m3	630 mg/m3
trimethoxyvinylsilane	9.5 ppm	100 ppm	120 ppm
3-aminopropyltrimethoxysilane	30 mg/m3	330 mg/m3	2,000 mg/m3
dibutyltin dilaurate	1.1 mg/m3	8 mg/m3	48 mg/m3

Ingredient	Original IDLH	Revised IDLH
polypropylene glycol	Not Available	Not Available
silica amorphous, fumed	Not Available	Not Available
trimethoxyvinylsilane	Not Available	Not Available
3-aminopropyltrimethoxysilane	Not Available	Not Available
dibutyltin dilaurate	25 mg/m3	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
trimethoxyvinylsilane	E	≤ 0.1 ppm
3-aminopropyltrimethoxysilane	C	> 1 to ≤ 10 parts per million (ppm)

Notes: Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

MATERIAL DATA

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

For amorphous crystalline silica (precipitated silicic acid):

Amorphous crystalline silica shows little potential for producing adverse effects on the lung and exposure standards should reflect a particulate of low intrinsic toxicity. Mixtures of amorphous silicas/ diatomaceous earth and crystalline silica should be monitored as if they comprise only the crystalline forms.


The dusts from precipitated silica and silica gel produce little adverse effect on pulmonary functions and are not known to produce significant disease or toxic effect.

IARC has classified silica, amorphous as Group 3: **NOT** classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

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 operating 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:	Air Speed:
	solvent, vapours, degreasing etc., evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min)
	aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
	direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min)
	grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)
Within each range the appropriate value depends on:		
Lower end of the range	Upper end of the range	
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents	
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity	
3: Intermittent, low production.	3: High production, heavy use	
4: Large hood or large air mass in motion	4: Small hood - local control only	
Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity		

	generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▸ Safety glasses with side shields. ▸ Chemical goggles. ▸ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. 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
Hands/feet protection	<ul style="list-style-type: none"> ▸ Wear chemical protective gloves, e.g. PVC. ▸ Wear safety footwear or safety gumboots, e.g. Rubber
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▸ Protective overalls, closely fitted at neck and wrist. ▸ Eye-wash unit. <p>IN CONFINED SPACES:</p> <ul style="list-style-type: none"> ▸ Non-sparking protective boots ▸ Static-free clothing. ▸ Ensure availability of lifeline. <p>Staff should be trained in all aspects of rescue work. Rescue gear: Two sets of SCBA breathing apparatus Rescue Harness, lines etc.</p>

Respiratory protection

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

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

* - Negative pressure demand ** - Continuous flow

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

- 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	Not Available		
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)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Available
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Not Available	pH as a solution (%)	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	<p>The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.</p> <p>Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by inhalation.</p> <p>Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by skin contact.</p>
Ingestion	<p>Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing.</p> <p>Adverse effects associated with the administration of central nervous system stimulants include dyspnea, coughing, bronchospasm, and laryngospasm.</p> <p>At low levels persons may demonstrate elevated mood, activity, and alertness. However, at toxic levels, irritability, insomnia, and agitation predominate. Seizures may occur as well and occur more commonly and at lower serum levels in cases of chronic overdose. Seizures are also more common in patients at the extremes of age.</p> <p>Muscular involvement may produce symptoms ranging from fasciculation to spasticity or seizures. Headache, dizziness and confusion may also result as can hyperpyrexia or a sensation of warmth. Other symptoms may include nausea, vomiting, diarrhoea and difficulty in urination. Cardiovascular involvement may produce alterations in blood pressure or arrhythmia. Stimulants may produce increases in blood pressure, heart rate, and pupillary dilation. Stimulant use may also result in hyperthermia, hyponatraemia, arrhythmias, myocardial infarction, and haemorrhagic stroke. Due to the excessive dopaminergic discharge, dyskinesias may be present.</p> <p>The toxic effects of glycols (dihydric alcohols), following ingestion are similar to those of alcohol, with depression of the central nervous system (CNS), nausea, vomiting and degenerative changes in liver and kidney.</p> <p>Effects on the nervous system characterise over-exposure to higher aliphatic alcohols. These include headache, muscle weakness, giddiness, ataxia, (loss of muscle coordination), confusion, delirium and coma. Gastrointestinal effects may include nausea, vomiting and diarrhoea. In the absence of effective treatment, respiratory arrest is the most common cause of death in animals acutely poisoned by the higher alcohols. Aspiration of liquid alcohols produces an especially toxic response as they are</p>

	<p>able to penetrate deeply in the lung where they are absorbed and may produce pulmonary injury. Those possessing lower viscosity elicit a greater response. The result is a high blood level and prompt death at doses otherwise tolerated by ingestion without aspiration. In general the secondary alcohols are less toxic than the corresponding primary isomers. As a general observation, alcohols are more powerful central nervous system depressants than their aliphatic analogues. In sequence of decreasing depressant potential, tertiary alcohols with multiple substituent OH groups are more potent than secondary alcohols, which, in turn, are more potent than primary alcohols. The potential for overall systemic toxicity increases with molecular weight (up to C7), principally because the water solubility is diminished and lipophilicity is increased.</p> <p>Within the homologous series of aliphatic alcohols, narcotic potency may increase even faster than lethality</p> <p>Only scanty toxicity information is available about higher homologues of the aliphatic alcohol series (greater than C7) but animal data establish that lethality does not continue to increase with increasing chain length. Aliphatic alcohols with 8 carbons are less toxic than those immediately preceding them in the series. 10 -Carbon n-decyl alcohol has low toxicity as do the solid fatty alcohols (e.g. lauryl, myristyl, cetyl and stearyl). However the rat aspiration test suggests that decyl and melted dodecyl (lauryl) alcohols are dangerous if they enter the trachea. In the rat even a small quantity (0.2 ml) of these behaves like a hydrocarbon solvent in causing death from pulmonary oedema.</p> <p>Primary alcohols are metabolised to corresponding aldehydes and acids; a significant metabolic acidosis may occur. Secondary alcohols are converted to ketones, which are also central nervous system depressants and which, in the case of the higher homologues persist in the blood for many hours. Tertiary alcohols are metabolised slowly and incompletely so their toxic effects are generally persistent.</p> <p>The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.</p> <p>Accidental ingestion of the material may be damaging to the health of the individual.</p>
<p>Skin Contact</p>	<p>Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by skin contact.</p> <p>The material may accentuate any pre-existing dermatitis condition</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>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.</p> <p>Skin contact with the material may be harmful; systemic effects may result following absorption.</p> <p>The material may produce moderate skin irritation; limited evidence or practical experience suggests, that the material either:</p> <ul style="list-style-type: none"> ▶ produces moderate inflammation of the skin in a substantial number of individuals following direct contact and/or ▶ produces significant, but moderate, 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. <p>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.</p>
<p>Eye</p>	<p>When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.</p>
<p>Chronic</p>	<p>There is sufficient evidence to provide a strong presumption that human exposure to the material may result in impaired fertility on the basis of: - clear 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.</p> <p>The synthetic, amorphous silicas are believed to represent a very greatly reduced silicosis hazard compared to crystalline silicas and are considered to be nuisance dusts.</p> <p>When heated to high temperature and a long time, amorphous silica can produce crystalline silica on cooling. Inhalation of dusts containing crystalline silicas may lead to silicosis, a disabling pulmonary fibrosis that may take years to develop. Discrepancies between various studies showing that fibrosis associated with chronic exposure to amorphous silica and those that do not may be explained by assuming that diatomaceous earth (a non-synthetic silica commonly used in industry) is either weakly fibrogenic or nonfibrogenic and that fibrosis is due to contamination by crystalline silica content</p> <p>Repeated exposure to synthetic amorphous silicas may produce skin dryness and cracking.</p> <p>Available data confirm the absence of significant toxicity by oral and dermal routes of exposure.</p> <p>Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted in a number of species, at airborne concentrations ranging from 0.5 mg/m³ to 150 mg/m³. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m³. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m³. Differences in values may be due to particle size, and therefore the number of particles administered per unit dose.</p> <p>Generally, as particle size diminishes so does the NOAEL/ LOAEL. Exposure produced transient increases in lung inflammation, markers of cell injury and lung collagen content. There was no evidence of interstitial pulmonary fibrosis.</p>

<p>Antas 636 All Purpose MS Adhesive Sealant 7`YUf</p>	<p>TOXICITY Not Available</p>	<p>IRRITATION Not Available</p>
<p>polypropylene glycol</p>	<p>TOXICITY Dermal (rabbit) LD50: >3000 mg/kg^[1]</p>	<p>IRRITATION Eye: no adverse effect observed (not irritating)^[1]</p>

	Inhalation(Rat) LC50; >2.34 mg/14h ^[1]	Skin (rabbit): 500 mg mild
	Oral(Rat) LD50; >2000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) ^[1]
silica amorphous, fumed	TOXICITY	IRRITATION
	Inhalation(Rat) LC50; 0.45 mg/L4h ^[2]	Not Available
	Oral(Rat) LD50; >5000 mg/kg ^[2]	
trimethoxyvinylsilane	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 3249.12 mg/kg ^[2]	Eye (rabbit): 500 mg/24h - mild
	Inhalation(Rat) LC50; 2773 ppm4h ^[1]	Eye (rabbit): 500 mg/24h mild
	Oral(Rat) LD50; >300<2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
		Skin (rabbit): 500 mg/24h - mild
		Skin (rabbit): 500 mg/24h mild
		Skin: no adverse effect observed (not irritating) ^[1]
3-aminopropyltrimethoxysilane	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 11605.1 mg/kg ^[1]	Not Available
	Inhalation(Rat) LC50; 64000 ppm4h ^[2]	
	Oral(Rat) LD50; 3050.19 mg/kg ^[1]	
dibutyltin dilaurate	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 100 mg/24h -moderate
	Oral(Rat) LD50; >=33<=300 mg/kg ^[1]	Skin (rabbit): 500 mg/24h - mild

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

POLYPROPYLENE GLYCOL	<p>** Rohm and Haas Paraplex WP-1 MSDS</p> <p>Polyethers, for example, ethoxylated surfactants and polyethylene glycols, are highly susceptible towards air oxidation as the ether oxygens will stabilize intermediary radicals involved. Investigations of a chemically well-defined alcohol (pentaethylene glycol mono-n-dodecyl ether) ethoxylate, showed that polyethers form complex mixtures of oxidation products when exposed to air.</p> <p>Sensitization studies in guinea pigs revealed that the pure nonoxidized surfactant itself is nonsensitizing but that many of the investigated oxidation products are sensitizers. Two hydroperoxides were identified in the oxidation mixture, but only one (16-hydroperoxy-3,6,9,12,15-pentaoxaheptacosan-1-ol) was stable enough to be isolated. It was found to be a strong sensitizer in LLNA (local lymph node assay for detection of sensitization capacity). The formation of other hydroperoxides was indicated by the detection of their corresponding aldehydes in the oxidation mixture .</p> <p>On the basis of the lower irritancy, nonionic surfactants are often preferred to ionic surfactants in topical products. However, their susceptibility towards autoxidation also increases the irritation. Because of their irritating effect, it is difficult to diagnose ACD to these compounds by patch testing.</p> <p>Allergic Contact Dermatitis—Formation, Structural Requirements, and Reactivity of Skin Sensitizers. Ann-Therese Karlberg et al; Chem. Res. Toxicol.2008,21,53-69</p> <p>Polyethylene glycols (PEGs) have a wide variety of PEG-derived mixtures due to their readily linkable terminal primary hydroxyl groups in combination with many possible compounds and complexes such as ethers, fatty acids, castor oils, amines, propylene glycols, among other derivatives. PEGs and their derivatives are broadly utilized in cosmetic products as surfactants, emulsifiers, cleansing agents, humectants, and skin conditioners.</p> <p>PEGs and PEG derivatives were generally regulated as safe for use in cosmetics, with the conditions that impurities and by-products, such as ethylene oxides and 1,4-dioxane, which are known carcinogenic materials, should be removed before they are mixed in cosmetic formulations.</p> <p>Most PEGs are commonly available commercially as mixtures of different oligomer sizes in broadly- or narrowly-defined molecular weight (MW) ranges. For instance, PEG-10,000 typically designates a mixture of PEG molecules (n = 195 to 265) having an average MW of 10,000. PEG is also known as polyethylene oxide (PEO) or polyoxyethylene (POE), with the three names being chemical synonyms. However, PEGs mainly refer to oligomers and polymers with molecular masses below 20,000 g/mol, while PEOs are polymers with molecular masses above 20,000 g/mol, and POEs are polymers of any molecular mass. Relatively small molecular weight PEGs are produced by the chemical reaction between ethylene oxide and water or ethylene glycol (or other ethylene glycol oligomers), as catalyzed by acidic or basic catalysts. To produce PEO or high-molecular weight PEGs, synthesis is performed by suspension polymerization. It is necessary to hold the growing polymer chain in solution during the course of the poly-condensation process. The reaction is catalyzed by magnesium-, aluminum-, or calcium-organoelement compounds. To prevent coagulation of polymer chains in the solution, chelating additives such as dimethylglyoxime are used</p> <p>Safety Evaluation of Polyethylene Glycol (PEG) Compounds for Cosmetic Use: Toxicol Res 2015; 31:105-136 The</p>
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	<p>Korean Society of Toxicology http://doi.org/10.5487/TR.2015.31.2.105 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.</p>
<p>SILICA AMORPHOUS, FUMED</p>	<p>For silane, dichlorodimethyl-, reaction products with silica Acute oral toxicity is very low for treated silica. Acute inhalation toxicity was only tested for inhalable particles and is not relevant for the material used industrially. Changes in respiratory organs (inflammatory processes) after repeated exposure were reversible in animals that survived the exposure and were observed above the valid TLV values, only. If TLV values are maintained no health hazards are expected. Repeated dose toxicity is sufficiently investigated. Treated silica is not mutagenic. The NOAEL for repro/developmental toxicity is 500 mg/kg bw. Acute toxicity: In a limit test giving 10% in the diet (5000 mg/kg bw) to rats the acute oral LD50 was determined to be higher than 5000 mg/kg bw. In another study administering single doses of 2500 and 5000 mg/kg bw to rats the LD50 was also concluded to be higher than 5000 mg/kg bw. In an acute oral toxicity study giving still higher single doses in olive oil the LD50 appeared to be above 7900 mg/kg bw. No signs of toxicity were observed in any of these studies. All inhalation testing has been conducted with a substance that differs significantly from the commercial product based on particle size. In these animal tests the experimental design caused the particle size to be reduced resulting in nearly 100% of the particle fraction being below 10 µm and capable of entering the deep lung (alveolar particle fraction). The alveolar fraction is responsible for the toxicological effects (suffocation; overloading of the lung due to poor dust clearance mechanisms) which were observed with LC50 values of > 477, 450, 520-1120, and >2280 mg/m³ and corresponding mass median aerodynamic diameters (MMAD) of 2.9 µm, 1.24 µm, 0.8 – 0.9 µm and 0.15 µm, respectively. In comparison to the particle size used in these acute inhalation animal tests, only minor amounts (less than 1 %) of the commercially available commercial substance have been measured as respirable (alveolar fraction < 10 µm MMAD) using test method EN/DIN 481 (ref.35). Using the same method > 99% of the particle fraction is in excess of 90 µm and can only reach the upper airways (nasal passages and throat) or cannot be inhaled at all. Therefore the tests do not represent the toxicological behavior of the commercial product and are not considered relevant for inclusion in the hazard definition/hazard assessment of the commercial substance. Genetic toxicity: The test substance was not mutagenic in the Bacterial Reverse Mutation Assay (Ames test) with <i>Salmonella typhimurium</i> TA98, TA100, TA1535, TA1537 and TA1538 strains and with <i>E. coli</i> WP2 uvrA strain. Also an in vitro chromosomal aberration study in CHO cells gave negative results. Repeat dose toxicity: A 24-month oral feeding study administering a 100 mg/kg dose to 20 male and 20 female rats resulted in a NOAEL of 100 mg/kg. No clinical signs or treatment-related changes (e.g. bodyweight) were observed. There were no carcinogenic effects. A 6-month oral feeding study showed no treatment-related effects at the given dose of 500 mg/kg bw to rats (40/sex) resulting in a NOAEL of 500 mg/kg bw; a slight progressive – but reversible -transformation of the adrenal cortex in females was attributed to chronic stress. Another oral feeding study (5-8 weeks) exposed rats (5/sex/treatment) to a dose of 500, 1000 or 2000 mg/kg bw initially and increasing these doses gradually to 4000, 8000 and 16000 mg/kg bw, respectively. Decrease in body weight and food consumption combined with apathy and decreased grooming activity and decreased cytoplasmic glycogen in hepatocytes may indicate a starving condition of these animals. At the highest dose group four animals died. The NOAEL was determined to be 500 mg/kg bw (LOAEL = 1000 mg/kg bw). In a limited reported study where a dose of 500 or 1000 mg/kg bw was administered by gavage to 30 rats no treatment-related effects could be found, resulting in a NOAEL of 1000 mg/kg bw. A 13-week inhalation study exposing 70 animals/sex to 35 mg/m³ resulted in granuloma-like lesions of the lungs, accumulations of alveolar macrophages, alveolar spaces filled with granular material, debris and polymorphonuclear leucocytes, alveolar bronchiolisation, interstitial fibrosis and enlarged mediastinal lymph nodes. In a 2-week study administering 0, 31, 87 or 420 mg/m³ to a total number of 40 rats/sex 4 males and 2 females died at the top dose level. The rats at the top dose level showed severe respiratory distress and apathy. A dose-related decrease in body weight was observed at 87 mg/m³ and higher. The lungs showed similar effects as those observed in the 13-week inhalation study. A 3-day study and an 8-12-month study both with a concentration of 50 mg/m³ to rats yielded similar results to the above studies in the lungs and the size of the particles was determined to be smaller than 7 µm. Changes in respiratory organs (inflammatory processes) observed in inhalative repeated dose toxicity testing were reversible in animals that survived the exposure. There was no indication of silicosis. Concentrations of the substances with toxicological effects in inhalative toxicity testing were above the valid TLV values (10mg/m³ USA). If TLV values are maintained no health hazards are expected. Reproductive and developmental toxicity: Two studies are included on repro/developmental toxicity. A 6-month, 1-generation study in rats combining fertility and prenatal toxicity testing administered 500 mg/kg bw in the food to 10 females and 2 males. No treatment-related effects were observed in the parents or in the offspring. Therefore the NOAEL for parents and offspring was 500 mg/kg. No effects on the female/male gonads were observed. In a 2-generation reproduction study 20 male and 20 female rats were given 100 mg/kg bw via oral feed for 24 months (see also repeated dose). No abnormalities were observed in the offspring resulting in a NOAEL of 100 mg/kg bw.</p>
<p>TRIMETHOXYVINYL SILANE</p>	<p>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 epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Manufacturers Data:</p>
<p>3-AMINOPROPYLTRIMETHOXYSILANE</p>	<p>*Dow Corning MSDS Toray Z-6610 Silane</p>
<p>DIBUTYL TIN DILAURATE</p>	<p>Exposure to the material may result in a possible risk of irreversible effects. The material may produce mutagenic effects in man. This concern is raised, generally, on the basis of appropriate studies using mammalian somatic cells in vivo. Such findings are often supported by positive results</p>

<p>Antas 636 All Purpose MS Adhesive Sealant Clear & SILICA AMORPHOUS, FUMED</p>	<p>from in vitro mutagenicity studies.</p> <p>For silica amorphous: Derived No Adverse Effects Level (NOAEL) in the range of 1000 mg/kg/d. In humans, synthetic amorphous silica (SAS) is essentially non-toxic by mouth, skin or eyes, and by inhalation. Epidemiology studies show little evidence of adverse health effects due to SAS. Repeated exposure (without personal protection) may cause mechanical irritation of the eye and drying/cracking of the skin. When experimental animals inhale synthetic amorphous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, the vast majority of SAS is excreted in the faeces and there is little accumulation in the body. Following absorption across the gut, SAS is eliminated via urine without modification in animals and humans. SAS is not expected to be broken down (metabolised) in mammals. After ingestion, there is limited accumulation of SAS in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated, but appears to be insignificant in animals and humans. SASs injected subcutaneously are subjected to rapid dissolution and removal. There is no indication of metabolism of SAS in animals or humans based on chemical structure and available data. In contrast to crystalline silica, SAS is soluble in physiological media and the soluble chemical species that are formed are eliminated via the urinary tract without modification. Both the mammalian and environmental toxicology of SASs are significantly influenced by the physical and chemical properties, particularly those of solubility and particle size. SAS has no acute intrinsic toxicity by inhalation. Adverse effects, including suffocation, that have been reported were caused by the presence of high numbers of respirable particles generated to meet the required test atmosphere. These results are not representative of exposure to commercial SASs and should not be used for human risk assessment. Though repeated exposure of the skin may cause dryness and cracking, SAS is not a skin or eye irritant, and it is not a sensitiser. Repeated-dose and chronic toxicity studies confirm the absence of toxicity when SAS is swallowed or upon skin contact. Long-term inhalation of SAS caused some adverse effects in animals (increases in lung inflammation, cell injury and lung collagen content), all of which subsided after exposure. Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted with SAS in a number of species, at airborne concentrations ranging from 0.5 mg/m³ to 150 mg/m³. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m³. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m³. The difference in values may be explained by different particle size, and therefore the number of particles administered per unit dose. In general, as particle size decreases so does the NOAEL/LOAEL. Neither inhalation nor oral administration caused neoplasms (tumours). SAS is not mutagenic in vitro. No genotoxicity was detected in in vivo assays. SAS does not impair development of the foetus. Fertility was not specifically studied, but the reproductive organs in long-term studies were not affected. For Synthetic Amorphous Silica (SAS) Repeated dose toxicity Oral (rat), 2 weeks to 6 months, no significant treatment-related adverse effects at doses of up to 8% silica in the diet. Inhalation (rat), 13 weeks, Lowest Observed Effect Level (LOEL) =1.3 mg/m³ based on mild reversible effects in the lungs. Inhalation (rat), 90 days, LOEL = 1 mg/m³ based on reversible effects in the lungs and effects in the nasal cavity. For silane treated synthetic amorphous silica: Repeated dose toxicity: oral (rat), 28-d, diet, no significant treatment-related adverse effects at the doses tested. There is no evidence of cancer or other long-term respiratory health effects (for example, silicosis) in workers employed in the manufacture of SAS. Respiratory symptoms in SAS workers have been shown to correlate with smoking but not with SAS exposure, while serial pulmonary function values and chest radiographs are not adversely affected by long-term exposure to SAS.</p>
<p>Antas 636 All Purpose MS Adhesive Sealant Clear & TRIMETHOXYVINYL SILANE & 3-AMINOPROPYLTRIMETHOXY SILANE</p>	<p>For alkoxy silanes: Low molecular weight alkoxy silanes (including alkyl orthosilicates) are a known concern for lung toxicity, due to inhalation of vapours or aerosols causing irreversible lung damage at low doses. Alkoxy silane groups that rapidly hydrolyse when in contact with water, result in metabolites that may only cause mild skin irritation. Although there appears to be signs of irritation under different test conditions, based on the available information, the alkoxy silanes cannot be readily classified as a skin irritant. The trimethoxy silane group of chemicals have previously been associated with occupational eye irritation in exposed workers who experienced severe inflammation of the cornea. Based on the collective information, these substances are likely to be severe irritants to the eyes. Methoxy silanes are generally reported to possess higher reactivity and toxicity compared to ethoxy silanes; some methoxy silanes appear to be carcinogenic. In the US, alkoxy silanes with alkoxy groups greater than C2 are classified as moderate concern. Based on available information on methoxy silanes, the possibility that this family causes skin sensitisation cannot be ruled out. Amine-functional methoxy silanes have previously been implicated as a cause of occupational contact dermatitis, often as a result of repeated skin exposure with workers involved in the manufacture or use of the resins containing the chemical during fibreglass production.</p>
<p>POLYPROPYLENE GLYCOL & TRIMETHOXYVINYL SILANE</p>	<p>The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>
<p>TRIMETHOXYVINYL SILANE & 3-AMINOPROPYLTRIMETHOXY SILANE</p>	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the</p>

absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

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

Legend: ✗ – Data either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

Antas 636 All Purpose MS Adhesive Sealant Clear	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
polypropylene glycol	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>100mg/l	2
	EC50	48h	Crustacea	>100mg/l	2
	LC50	96h	Fish	>100mg/l	2
	NOEC(ECx)	504h	Crustacea	>=10mg/l	2
	EC50	96h	Algae or other aquatic plants	3000-4000mg/l	2
silica amorphous, fumed	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	24h	Crustacea	>=10000mg/l	1
trimethoxyvinylsilane	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>89mg/l	2
	LC50	96h	Fish	>92.2mg/l	2
	EC50	48h	Crustacea	>100mg/l	2
	NOEC(ECx)	48h	Crustacea	1mg/l	2
3-aminopropyltrimethoxysilane	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	603mg/l	2
	LC50	96h	Fish	>100mg/l	2
	EC50	48h	Crustacea	>100mg/l	2
	NOEC(ECx)	72h	Algae or other aquatic plants	1.3mg/l	2
dibutyltin dilaurate	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96h	Fish	21.2mg/l	2
	EC50	48h	Crustacea	1.7-3.4mg/l	2
	EC10(ECx)	96h	Algae or other aquatic plants	>0.5mg/l	4
	BCF	1344h	Fish	2.2-40	7
	EC50	72h	Algae or other aquatic plants	>1mg/l	2

Legend: Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8.

Vendor Data

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For silica amorphous:

Amorphous silica is chemically and biologically inert. It is not biodegradable. Due to its insolubility in water there is a separation at every filtration and sedimentation process.]

Crystalline and/or amorphous silicas are ubiquitous on the earth in soils and sediments, and in living organisms (e.g. diatoms), but only the dissolved form is bioavailable. On a global scale, the level of man-made synthetic amorphous silicas (SAS) represents up to 2.4% of the dissolved silica naturally present in the aquatic environment. The rate of SAS released into the environment during the product life cycle is negligible in comparison with the natural flux of silica in the environment

Untreated SASs have a relatively low water solubility of 1.91 to 2.51 mmol/l (114 - 151 mg/l) and an extremely low vapour pressure (e.g. < 10⁻³ Pa at 20° C for Aerosil R972). On the basis of these properties it is expected that SAS released into the environment will be distributed mainly into soil/sediment, slightly into water, and probably not at all into air.

With surface-treated SASs, the addition of organosilicon compounds increases the hydrophobicity. Consequently, the water solubility is lower than that of untreated silica. The vapour pressure remains extremely low. Due to the presence of organic substances such as surfactants, salts, acids and alkalis in the environment, it is expected that surface-treated silica will be wetted and then adsorbed onto soils or sediments.

SAS is regarded as an inert substance and is not expected to undergo any transformation in the atmospheric or terrestrial compartment, apart from dissolution by water.

Biodegradability in sewage treatment plant or in surface water is not applicable to inorganic substances like SAS. Therefore the biodegradation endpoint has limited relevance for SAS. In surface modified SASs, the most common treating agents are organosilicon compounds and these generally represent less than 5% of the material. Biodegradation in sewage treatment plant or in surface water is not expected. Some biodegradation in soil may occur by analogy with the behaviour of linear polydimethylsiloxane in this compartment

Ecotoxicity:

Based on available data, SAS is not toxic to environmental organisms (apart from physical desiccation in insects). SAS presents a low risk for adverse effects to the environment.

When hydrophilic SASs (Aerosil 200 and Ultrasil VN3; purity 100% and 98%, respectively), were tested for their acute toxicity to fish and crustaceans, the LC50 and EC50 values were higher than 10,000 mg/l and 1,000 mg/l, respectively.

The zebra fish (*Brachydanio rerio*) test was performed with SAS in suspension, due to the insolubility of the SAS. No mortality was observed for the fish after 96 hours of exposure at 1,000 mg/l and 10,000 mg/l. The test media remained turbid throughout the test, indicating that the limit of solubility of the product was exceeded.

With the water flea (*Daphnia magna*), SAS suspensions exceeding the limit of solubility were tested.; some immobilisation was observed. However, no significant immobilisation was observed when a solution filtered through microfibre glass filter was tested. The observed effects were likely caused by physical hampering of the *Daphnia* due to the presence of undissolved particles.

A surface-treated SAS (Aerosil R974; 99.9% pure) was tested on fish and crustaceans. The LC50 to fish and EC50 to *Daphnia* were found to be higher than 10,000 mg/l and 1,000 mg/l, respectively

The EC50 to algae was found to be higher than 10,000 mg/l filtered suspension The actual dissolved concentrations were not determined. There was no inhibition of the biomass or of the growth rate with the 10,000 mg/l filtered suspension.

The antibacterial effect of pressed and unpressed high purity SAS (Aerosil, unspecified) (0.2 g silica + 0.15 ml bacteria strain suspension) kept at 22 C has been investigated (SAS is sometimes pressed to remove air before transportation). The following micro-organisms were studied: *Escherichia coli*, *Proteus* sp., *Pseudomonas aeruginosa*, *Aerobacter aerogenes*,

Micrococcus pyrogenes aureus, *Streptococcus faecalis*, *Streptococcus pyrogenes humans*, *Corynebacterium diphtheria*, *Candida albicans* and *Bacillus subtilis*.

The SAS was contaminated either by hand contact, by saliva droplets or by contact with the atmosphere. Rodshaped gram-negative organisms (*Escherichia coli*, *Bacterium proteus*, *Pseudomonas aeruginosa*

and *Aerobacter aerogenes*) died between 6 hours and 3 days in contact with unpressed SAS. Gram-positive micro-organisms were somewhat more resistant. In addition, the tests demonstrated that survival of bacteria was shorter in unpressed than in pressed SAS.

For silica:

The literature on the fate of silica in the environment concerns dissolved silica in the aquatic environment, irrespective of its origin (man-made or natural), or structure (crystalline or amorphous). Indeed, once released and dissolved into the environment no distinction can be made between the initial forms of silica. At normal environmental pH, dissolved silica exists exclusively as monosilicic acid [Si(OH)₄]. At pH 9.4 the solubility of amorphous silica is about 120 mg SiO₂/l . Quartz has a solubility of only 6 mg/l, but its rate of dissolution is so slow at ordinary temperature and pressure that the solubility of amorphous silica represents the upper limit of dissolved silica concentration in natural waters. Moreover, silicic acid is the bioavailable form for aquatic organisms and it plays an important role in the biogeochemical cycle of Si, particularly in the oceans.

In the oceans, the transfer of dissolved silica from the marine hydrosphere to the biosphere initiates the global biological silicon cycle. Marine organisms such as diatoms, silicoflagellates and radiolarians build up their skeletons by taking up silicic acid from seawater. After these organisms die, the biogenic silica accumulated in them partly dissolves. The portion of the biogenic silica that does not dissolve settles and ultimately reaches the sediment. The transformation of opal (amorphous biogenic silica) deposits in sediments through diagenetic processes allows silica to re-enter the geological cycle. Silica is labile between the water and sediment interface.

Ecotoxicity:

Fish LC50 (96 h): *Brachydanio rerio* >10000 mg/l; zebra fish >10000 mg/l

Daphnia magna EC50 (24 h): >1000 mg/l; LC50 924 h): >10000 mg/l

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
trimethoxyvinylsilane	HIGH	HIGH

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Ingredient	Persistence: Water/Soil	Persistence: Air
3-aminopropyltrimethoxysilane	HIGH	HIGH
dibutyltin dilaurate	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
trimethoxyvinylsilane	LOW (LogKOW = -0.3169)
3-aminopropyltrimethoxysilane	LOW (LogKOW = -1.1604)
dibutyltin dilaurate	LOW (BCF = 110)

Mobility in soil

Ingredient	Mobility
trimethoxyvinylsilane	LOW (KOC = 757.6)
3-aminopropyltrimethoxysilane	LOW (KOC = 1936)
dibutyltin dilaurate	LOW (KOC = 64610000)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Containers may still present a chemical hazard/ danger when empty. ▶ Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> ▶ 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 allow wash water from cleaning or process equipment to enter drains. ▶ It may be necessary to collect all wash water for treatment before disposal. ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. ▶ Where in doubt contact the responsible authority. ▶ Recycle wherever possible or consult manufacturer for recycling options. ▶ Consult State Land Waste Authority for disposal. ▶ Bury or incinerate residue at an approved site. ▶ Recycle containers if possible, or dispose of in an authorised landfill.
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SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

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

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

Not Applicable

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

Product name	Group
polypropylene glycol	Not Available
silica amorphous, fumed	Not Available
trimethoxyvinylsilane	Not Available
3-aminopropyltrimethoxysilane	Not Available
dibutyltin dilaurate	Not Available

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Transport in bulk in accordance with the ICG Code

Product name	Ship Type
polypropylene glycol	Not Available
silica amorphous, fumed	Not Available
trimethoxyvinylsilane	Not Available
3-aminopropyltrimethoxysilane	Not Available
dibutyltin dilaurate	Not Available

SECTION 15 Regulatory information

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

polypropylene glycol is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

silica amorphous, fumed is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

trimethoxyvinylsilane is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

3-aminopropyltrimethoxysilane is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

dibutyltin dilaurate 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 7

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 (polypropylene glycol; silica amorphous, fumed; trimethoxyvinylsilane; 3-aminopropyltrimethoxysilane; dibutyltin dilaurate)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (silica amorphous, fumed)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (trimethoxyvinylsilane; 3-aminopropyltrimethoxysilane)
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 and are not exempt from listing (see specific ingredients in brackets)

SECTION 16 Other information

Revision Date	30/06/2021
Initial Date	30/06/2021

SDS Version Summary

Version	Date of Update	Sections Updated
0.0.2.1	26/04/2021	Regulation Change
0.0.3.1	03/05/2021	Regulation Change
0.0.4.1	06/05/2021	Regulation Change
0.0.5.1	10/05/2021	Regulation Change
0.0.5.2	30/05/2021	Template Change
0.0.5.3	04/06/2021	Template Change
0.0.5.4	05/06/2021	Template Change
0.0.6.4	07/06/2021	Regulation Change
0.0.6.5	09/06/2021	Template Change
0.0.6.6	11/06/2021	Template Change
0.0.6.7	15/06/2021	Template Change
0.0.7.7	17/06/2021	Regulation Change
0.0.8.7	21/06/2021	Regulation Change

Other information**Ingredients with multiple cas numbers**

Name	CAS No
polypropylene glycol	25322-69-4, 29434-03-5
silica amorphous, fumed	68611-44-9, 112945-52-5, 60842-32-2

Classification of the preparation and its individual components has drawn on official and authoritative sources 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
 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
 KECl: 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

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FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances