

# **DUNLOP Postcrete Ardex (Ardex NZ)**

Chemwatch: **72-0060** Version No: **5.1** 

Safety Data Sheet according to the Health and Safety at Work (Hazardous Substances) Regulations 2017

#### Chemwatch Hazard Alert Code: 3

Issue Date: 23/12/2022 Print Date: 06/03/2024 L.GHS.NZL.EN.E

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

Product Identifier	
Product name	DUNLOP Postcrete
Chemical Name	Not Applicable
Synonyms	Not Available
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 General concrete projects requiring very fast setting times.

## Details of the manufacturer or supplier of the safety data sheet

Registered company name	Ardex (Ardex NZ)
Address	32 Lane Street Woolston Christchurch New Zealand
Telephone	+64 3384 3029 +64 3384 9779
Fax	+64 3384 9779
Website	www.ardex.co.nz
Email	info@ardexnz.com

## Emergency telephone number

Association / Organisation	Ardex (Ardex NZ)
Emergency telephone numbers	+64 3 373 6900
Other emergency telephone numbers	0800 764 766 (NZ NPC)

## **SECTION 2 Hazards identification**

#### Classification of the substance or mixture

Considered a Hazardous Substance according to the criteria of the New Zealand Hazardous Substances New Organisms legislation. Not regulated for transport of Dangerous Goods.

Classification [1]	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure Category 1, Specific Target Organ Toxicity - Repeated Exposure Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI
Determined by Chemwatch using GHS/HSNO criteria	6.3A, 8.3A, 6.5B (contact), 6.9A, 6.1E (respiratory tract irritant)

## Label elements

Hazard pictogram(s)







Issue Date: 23/12/2022 Print Date: 06/03/2024

	Signal word	Dange
Hazard statemer	nt(s)	

H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H318	Causes serious eye damage.
H335	May cause respiratory irritation.
H370	Causes damage to organs.
H372	Causes damage to organs through prolonged or repeated exposure.

## Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P270	Do not eat, drink or smoke when using this product.
P264	Wash all exposed external body areas thoroughly after handling.
P272	Contaminated work clothing should not be allowed out of the workplace.

## Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P311	IF exposed or concerned: Call a POISON CENTER/doctor/physician/first aider.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

## Precautionary statement(s) Storage

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

## Precautionary statement(s) Disposal

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

## **SECTION 3 Composition / information on ingredients**

## Substances

See section below for composition of Mixtures

## Mixtures

CAS No	%[weight]	Name	
65997-15-1	15-20	portland cement	
14808-60-7	30-35	silica crystalline - quartz	
Not Available	45-50	aggregate.	
Not Available	4-5	Ingredients determined not to be hazardous	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available		

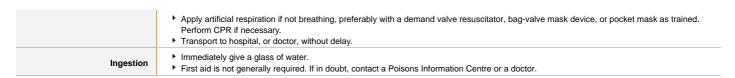
## **SECTION 4 First aid measures**

Description	of firet	aid	moseuroe
Description	or mist	aıu	measures

Description of first aid measur	es
Eye Contact	If this product comes in contact with the eyes:  Immediately hold eyelids apart and flush the eye continuously with running water.  Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.  Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.  Transport to hospital or doctor without delay.  Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs:  Immediately remove all contaminated clothing, including footwear.  Flush skin and hair with running water (and soap if available).  Seek medical attention in event of irritation.
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> </ul>

## Page 3 of 11 **DUNLOP Postcrete**

Issue Date: 23/12/2022 Print Date: 06/03/2024



#### Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

#### **SECTION 5 Firefighting measures**

## Extinguishing media

- $\mbox{\ }\mbox{\ }\mbox{\ }$  There is no restriction on the type of extinguisher which may be used.
- ▶ Use extinguishing media suitable for surrounding area.

#### Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	<ul> <li>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.</li> <li>When heated to extreme temperatures, (&gt;1700 deg.C) amorphous silica can fuse.</li> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Use fire fighting procedures suitable for surrounding area.</li> <li>DO NOT approach containers suspected to be hot.</li> <li>Cool fire exposed containers with water spray from a protected location.</li> <li>If safe to do so, remove containers from path of fire.</li> <li>Equipment should be thoroughly decontaminated after use.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered a significant fire risk, however containers may burn.</li> <li>Decomposes on heating and produces toxic fumes of: silicon dioxide (SiO2)</li> <li>May emit poisonous fumes.</li> </ul>

## **SECTION 6 Accidental release measures**

## Personal precautions, protective equipment and emergency procedures

May emit corrosive fumes.

See section 8

## **Environmental precautions**

See section 12

## Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Remove all ignition sources.</li> <li>Clean up all spills immediately.</li> <li>Avoid contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> <li>Use dry clean up procedures and avoid generating dust.</li> <li>Place in a suitable, labelled container for waste disposal.</li> </ul>
Major Spills	Moderate hazard.  CAUTION: Advise personnel in area.  Alert Emergency Services and tell them location and nature of hazard.  Control personal contact by wearing protective clothing.  Prevent, by any means available, spillage from entering drains or water courses.  Recover product wherever possible.  IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.  ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.  If contamination of drains or waterways occurs, advise Emergency Services.

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

## **SECTION 7 Handling and storage**

#### Precautions for safe handling

Avoid all personal contact, including inhalation.

Wear protective clothing when risk of exposure occurs.

▶ Use in a well-ventilated area.

Safe handling

- Prevent concentration in hollows and sumps.
- ▶ 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.

## Page 4 of 11

Issue Date: 23/12/2022 Print Date: 06/03/2024

#### **DUNLOP Postcrete**

	<ul> <li>Keep containers securely sealed when not in use.</li> <li>Avoid physical damage to containers.</li> <li>Always wash hands with soap and water after handling.</li> <li>Work clothes should be laundered separately. Launder contaminated clothing before re-use.</li> <li>Use good occupational work practice.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.</li> </ul>
Other information	<ul> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry, well-ventilated area.</li> <li>Store away from incompatible materials and foodstuff containers.</li> <li>Protect containers against physical damage and check regularly for leaks.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> </ul>

## Conditions for safe storage, including any incompatibilities

Suitable container	<ul> <li>Polyethylene or polypropylene container.</li> <li>Check all containers are clearly labelled and free from leaks.</li> </ul>
Storage incompatibility	<ul> <li>WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively.</li> <li>The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive.</li> <li>Avoid reaction with borohydrides or cyanoborohydrides</li> <li>Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.</li> <li>Avoid contact with copper, aluminium and their alloys.</li> </ul>

#### **SECTION 8 Exposure controls / personal protection**

#### **Control parameters**

## Occupational Exposure Limits (OEL)

## INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
New Zealand Workplace Exposure Standards (WES)	portland cement	Cement (Portland cement)	3 mg/m3	Not Available	Not Available	(dsen) - Dermal sensitiser
New Zealand Workplace Exposure Standards (WES)	portland cement	Cement (Portland cement) respirable dust	1 mg/m3	Not Available	Not Available	(dsen) - Dermal sensitiser
New Zealand Workplace Exposure Standards (WES)	silica crystalline - quartz	Silica- Crystalline (all forms) respirable dust	0.025 mg/m3	Not Available	Not Available	carcinogen category 1 - Known or presumed human carcinogen; $\alpha$ -quartz and cristobalite are confirmed carcinogens. Significant risk to workers will remain at WES-TWA exposures of 0.025mg/m3. The US Occupational Safety and Health Administration (OSHA) has estimated the lifetime silicosis mortality risk for workers exposed at this level for 8 hours per day at between 4 and 22 deaths per 1,000 workers and the lifetime lung cancer mortality risk for workers exposed at this level for 8 hours per day at between 3 and 23 deaths per 1,000 workers.

## Emergency Limits

Ingredient	TEEL-1	TEEL-2		TEEL-3
silica crystalline - quartz	0.075 mg/m3	33 mg/m3		200 mg/m3
Ingredient	Original IDLH		Revised ID	LH

Ingredient	Original IDLH	Revised IDLH
portland cement	5,000 mg/m3	Not Available
silica crystalline - quartz	25 mg/m3 / 50 mg/m3	Not Available

## MATERIAL DATA

#### **Exposure controls**

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

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

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

## Appropriate engineering

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. An approved self contained breathing apparatus (SCBA) may be required in some situations.

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

Type of Contaminant:

Air Speed:

## Page 5 of 11 DUNLOP Postcrete

Issue Date: **23/12/2022**Print Date: **06/03/2024** 

solvent, vapours, degreasing etc., evaporating from tank (in still air).

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)

direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)

grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).

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.

# Individual protection measures, such as personal protective equipment













#### Eye and face protection

Safety glasses with side shields.

Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent]

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].

## Skin protection

See Hand protection below

## NOTE:

- The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

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

- · frequency and duration of contact,
- $\boldsymbol{\cdot}$  chemical resistance of glove material,
- $\boldsymbol{\cdot}$  glove thickness and
- · dexterity

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

- · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- Contaminated gloves should be replaced.

  As defined in ASTM F-739-96 in any application.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- · Excellent when breakthrough time > 480 min
- · Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 min
- $\cdot$  Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task.

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of.
- · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene.
- nitrile rubber.
- butyl rubber.

Chemwatch: **72-0060** Page **6** of **11**Version No: **5.1** 

#### **DUNLOP Postcrete**

Issue Date: 23/12/2022 Print Date: 06/03/2024

	<ul> <li>fluorocaoutchouc.</li> <li>polyvinyl chloride.</li> <li>Gloves should be examined for wear and/ or degradation constantly.</li> </ul>
Body protection	See Other protection below
Other protection	<ul> <li>Overalls.</li> <li>P.V.C apron.</li> <li>Barrier cream.</li> <li>Skin cleansing cream.</li> <li>Eye wash unit.</li> </ul>

#### Respiratory protection

Type -P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, 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)

If inhalation risk above the TLV exists, wear approved dust respirator.

Use respirators with protection factors appropriate for the exposure level.

- ▶ Up to 5 X TLV, use valveless mask type; up to 10 X TLV, use 1/2 mask dust respirator
- ▶ Up to 50 X TLV, use full face dust respirator or demand type C air supplied respirator
- ▶ Up to 500 X TLV, use powered air-purifying dust respirator or a Type C pressure demand supplied-air respirator
- Over 500 X TLV wear full-face self-contained breathing apparatus with positive pressure mode or a combination respirator with a Type C positive pressure supplied-air full-face respirator and an auxiliary self-contained breathing apparatus operated in pressure demand or other positive pressure mode
- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- · Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- · Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- · Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- · Use approved positive flow mask if significant quantities of dust becomes airborne
- · Try to avoid creating dust conditions.

#### **SECTION 9 Physical and chemical properties**

## Information on basic physical and chemical properties

Appearance	Grey powder; not miscible with water.			
Physical state	Divided Solid	Relative density (Water = 1)	1.0	
Odour	Not Available	Partition coefficient n-octanol / water	Not Available	
Odour threshold	Not Available	Auto-ignition temperature (°C)	>350	
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Available	
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available	
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable	
Flash point (°C)	Not Applicable	Taste	Not Available	
Evaporation rate	Not Available	Explosive properties	Not Available	
Flammability	Not Applicable	Oxidising properties	Not Available	
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable	
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available	
Vapour pressure (kPa)	Not Available	Gas group	Not Available	
Solubility in water	Immiscible	pH as a solution (1%)	Not Available	
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available	

#### **SECTION 10 Stability and reactivity**

Reactivity Se

See section 7

Issue Date: **23/12/2022**Print Date: **06/03/2024** 

Chemical stability	<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
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

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.

#### Inhaled

Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures. Effects on lungs are significantly enhanced in the presence of respirable particles. Overexposure to respirable dust may produce wheezing, coughing and breathing difficulties leading to or symptomatic of impaired respiratory function.

## Ingestion

The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

## Skin Contact

Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

The material may accentuate any pre-existing dermatitis condition

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

When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.

Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.

Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.

Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive.

Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health

surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance.

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

Chronic

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Overexposure to the breathable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity and chest infections. Repeated exposures in the workplace to high levels of fine-divided dusts may produce a condition known as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50000 inch) are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses, the cough produces stringy phlegm, vital capacity decreases further, and shortness of breath becomes more severe. Other signs or symptoms include changed breath sounds, reduced oxygen uptake during exercise, emphysema and rarely, pneumothorax (air in the lung cavity).

Removing workers from the possibility of further exposure to dust generally stops the progress of lung abnormalities. When there is high potential for worker exposure, examinations at regular period with emphasis on lung function should be performed.

Inhaling dust over an extended number of years may cause pneumoconiosis, which is the accumulation of dusts in the lungs and the subsequent tissue reaction. This may or may not be reversible.

Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

## **DUNLOP Postcrete**

TOXICITY	IRRITATION
Not Available	Not Available

## Page 8 of 11 DUNLOP Postcrete

Issue Date: 23/12/2022 Print Date: 06/03/2024

	TOXICITY	IRRITATION
portland cement	Not Available	Not Available
	TOXICITY	IRRITATION
silica crystalline - quartz	Oral (Rat) LD50: 500 mg/kg <sup>[2]</sup>	Not Available

#### Leaend:

 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

## PORTLAND CEMENT

The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production. No significant acute toxicological data identified in literature search.

## SILICA CRYSTALLINE -QUARTZ

WARNING: For inhalation exposure ONLY: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS

The International Agency for Research on Cancer (IARC) has classified occupational exposures to **respirable** (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.

Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.

\* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).

NOTE: the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.

Acute Toxicity	×	Carcinogenicity	×
Skin Irritation/Corrosion	✓	Reproductivity	×
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✓
Respiratory or Skin sensitisation	<b>✓</b>	STOT - Repeated Exposure	<b>~</b>
Mutagenicity	X	Aspiration Hazard	X

Legend:

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

Data available to make classification

#### **SECTION 12 Ecological information**

#### Toxicity

	Endpoint	Test Duration (hr)	Species	Value	Source
DUNLOP Postcrete	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
portland cement	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
silica crystalline - quartz	Not Available	Not Available	Not Available	Not Available	Not Available

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

#### DO NOT discharge into sewer or waterways

#### Persistence and degradability

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

#### **DUNLOP Postcrete**

Issue Date: 23/12/2022 Print Date: 06/03/2024

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

#### **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.
- ▶ Recycle wherever possible or consult manufacturer for recycling options.
- Consult State Land Waste Management Authority for disposal.
- Bury residue in an authorised landfill.
- Recycle containers if possible, or dispose of in an authorised landfill.

Ensure that the hazardous substance is disposed in accordance with the Hazardous Substances (Disposal) Notice 2017

#### **Disposal Requirements**

Packages that have been in direct contact with the hazardous substance must be only disposed if the hazardous substance was appropriately removed and cleaned out from the package. The package must be disposed according to the manufacturer's directions taking into account the material it is made of. Packages which hazardous content have been appropriately treated and removed may be recycled.

The hazardous substance must only be disposed if it has been treated by a method that changed the characteristics or composition of the substance and it is no longer hazardous. Only dispose to the environment if a tolerable exposure limit has been set for the substance.

Only deposit the hazardous substance into or onto a landfill or sewage facility or incinerator, where the hazardous substance can be handled and treated appropriately.

#### **SECTION 14 Transport information**

#### Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (UN): 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

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

Not Applicable

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

Product name	Group
portland cement	Not Available
silica crystalline - quartz	Not Available

#### 14.7.3. Transport in bulk in accordance with the IGC Code

•	
Product name	Ship Type
portland cement	Not Available
silica crystalline - quartz	Not Available

#### **SECTION 15 Regulatory information**

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

This substance is to be managed using the conditions specified in an applicable Group Standard

HSR Number	Group Standard
HSR002670	Surface Coatings and Colourants Subsidiary Hazard Group Standard 2020

Please refer to Section 8 of the SDS for any applicable tolerable exposure limit or Section 12 for environmental exposure limit.

#### portland cement is found on the following regulatory lists

New Zealand Inventory of Chemicals (NZIoC)

New Zealand Workplace Exposure Standards (WES)

## silica crystalline - quartz is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

#### **DUNLOP Postcrete**

Issue Date: 23/12/2022 Print Date: 06/03/2024

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 1: Carcinogenic to humans

New Zealand Approved Hazardous Substances with controls

New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals

 $New\ Zealand\ Hazardous\ Substances\ and\ New\ Organisms\ (HSNO)\ Act\ -\ Classification\ of\ Chemicals\ -\ Classification\ Data$ 

New Zealand Inventory of Chemicals (NZIoC)

New Zealand Workplace Exposure Standards (WES)

#### **Additional Regulatory Information**

Not Applicable

#### **Hazardous Substance Location**

Subject to the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Quantities
Not Applicable	Not Applicable

#### **Certified Handler**

Subject to Part 4 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Class of substance	Quantities
Not Applicable	Not Applicable

Refer Group Standards for further information

#### Maximum quantities of certain hazardous substances permitted on passenger service vehicles

Subject to Regulation 13.14 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Gas (aggregate water capacity in mL)	Liquid (L)	Solid (kg)	Maximum quantity per package for each classification
6.5A or 6.5B	120	1	3	

#### **Tracking Requirements**

Not Applicable

## **National Inventory Status**

National Inventory	Status			
Australia - AIIC / Australia Non-Industrial Use	Yes			
Canada - DSL	Yes			
Canada - NDSL	No (portland cement; silica crystalline - quartz)			
China - IECSC	Yes			
Europe - EINEC / ELINCS / NLP	Yes			
Japan - ENCS	No (portland cement)			
Korea - KECI	Yes			
New Zealand - NZIoC	Yes			
Philippines - PICCS	No (portland cement)			
USA - TSCA	Yes			
Taiwan - TCSI	Yes			
Mexico - INSQ	Yes			
Vietnam - NCI	Yes			
Russia - 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	23/12/2022
Initial Date	30/11/2016

#### **SDS Version Summary**

Version	Date of Update	Sections Updated	
4.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification	
5.1	23/12/2022	Classification review due to GHS Revision change.	

#### 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.

# Page 11 of 11 DUNLOP Postcrete

Issue Date: **23/12/2022**Print Date: **06/03/2024** 

#### **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
- ► DNEL: Derived No-Effect Level
- ▶ PNEC: Predicted no-effect concentration
- ▶ 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

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TEL (+61 3) 9572 4700.