POLYTHANE BRUSH CLEAN

RESENE PAINTS AUSTRALIA

Version No: 2.3
Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: 11/07/2014 Print Date: 26/01/2015 Initial Date: 11/07/2014 S.GHS.AUS.EN

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

Product Identifier

Product name	POLYTHANE BRUSH CLEAN
Chemical Name	Not Applicable
Synonyms	3614
Proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

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

Details of the manufacturer/importer

Registered company name	RESENE PAINTS AUSTRALIA
Address	7 Production Ave, Molendinar 4214 QLD Australia
Telephone	+61 7 55126600
Fax	+61 7 55126697
Website	Not Available
Email	Not Available

Emergency telephone number

Association / Organisa	ion Not Available
Emergency telepl num	one 131126
Other emergency teleph num	one 131126

CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
1800 039 008	+612 9186 1132	Not Available

Once connected and if the message is not in your prefered language then please dial ${\bf 01}$

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

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

Poisons Schedule	Not Applicable
GHS Classification [1]	Flammable Liquid Category 3, Acute Toxicity (Dermal) Category 4, Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Eye Irritation Category 2, STOT - SE (Narcosis) Category 3, Aspiration Hazard Category 1, Acute Aquatic Hazard Category 3
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

Label elements

GHS label elements







SIGNAL WORD

DANGER

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Hazard statement(s)

H226	Flammable liquid and vapour
H312	Harmful in contact with skin
H332	Harmful if inhaled
H315	Causes skin irritation
H319	Causes serious eye irritation
H336	May cause drowsiness or dizziness
H304	May be fatal if swallowed and enters airways
H402	Harmful to aquatic life
AUH066	Repeated exposure may cause skin dryness and cracking

Supplementary statement(s)

Not Applicable

Precautionary statement(s) Prevention

P210 Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.

Precautionary statement(s) Response

P301+P310 IF SWALLOWED: Immediately call a POISON CENTER/doctor/physician/first aider

Precautionary statement(s) Storage

P403+P235 Store in a well-ventilated place. Keep cool.

Precautionary statement(s) Disposal

P501

Dispose of contents/container to authorised chemical landfill or if organic to high temperature incineration

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name		
1330-20-7	<50	xylene		
109-59-1	20-40	ethylene glycol monoisopropyl ether		
123-86-4	20-40	n-butyl acetate		
64-17-5	<10	ethanol, denatured		
67-56-1	<1	methanol		

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: Wash out immediately with fresh running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs: ► Immediately remove all contaminated clothing, including footwear. ► Flush skin and hair with running water (and soap if available). ► Seek medical attention in event of irritation.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor.
Ingestion	 If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice. Avoid giving milk or oils. Avoid giving alcohol.

Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for

If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

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difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

Followed acute or short term repeated exposures to ethylene glycol monoalkyl ethers and their acetates:

- Hepatic metabolism produces ethylene glycol as a metabolite.
- Clinical presentation, following severe intoxication, resembles that of ethylene glycol exposures.
- Monitoring the urinary excretion of the alkoxyacetic acid metabolites may be a useful indication of exposure.

[Ellenhorn and Barceloux: Medical Toxicology]

For acute or short term repeated exposures to ethylene glycol:

- Early treatment of ingestion is important. Ensure emesis is satisfactory.
- Test and correct for metabolic acidosis and hypocalcaemia.
- Apply sustained diuresis when possible with hypertonic mannitol.
- Evaluate renal status and begin haemodialvsis if indicated. [I.L.O]
- Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- ▶ Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600

for simple esters:

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema.
- Monitor and treat, where necessary, for shock.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- ▶ Give activated charcoal.

ADVANCED TREATMENT

ADVANCED INLATIMEN

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

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- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

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.

For acute or short term repeated exposures to xylene:

- Gastro-intestinal absorption is significant with ingestions. For ingestions exceeding 1-2 ml (xylene)/kg, intubation and lavage with cuffed endotracheal tube is recommended. The use of charcoal and cathartics is equivocal.
- Pulmonary absorption is rapid with about 60-65% retained at rest.
- Primary threat to life from ingestion and/or inhalation, is respiratory failure.
- Patients should be quickly evaluated for signs of respiratory distress (e.g. cyanosis, tachypnoea, intercostal retraction, obtundation) and given oxygen. Patients with inadequate tidal volumes or poor arterial blood gases (pO2 < 50 mm Hg or pCO2 > 50 mm Hg) should be intubated.
- Arrhythmias complicate some hydrocarbon ingestion and/or inhalation and electrocardiographic evidence of myocardial injury has been reported; intravenous lines and cardiac monitors should be established in obviously symptomatic patients. The lungs excrete inhaled solvents, so that hyperventilation improves clearance.
- A chest x-ray should be taken immediately after stabilisation of breathing and circulation to document aspiration and detect the presence of pneumothorax.
- Epinephrine (adrenalin) is not recommended for treatment of bronchospasm because of potential myocardial sensitisation to catecholamines. Inhaled cardioselective bronchodilators (e.g. Alupent, Salbutamol) are the preferred agents, with aminophylline a second choice.

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

Determinant Methylhippu-ric acids in urine

Index 1.5 gm/gm creatinine 2 mg/min

Sampling Time Fnd of shift Last 4 hrs of shift Comments

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

► Foam.

Special hazards arising from the substrate or mixture

Fire Incompatibility

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

Advice for firefighters

Fire Fighting

▶ Alert Fire Brigade and tell them location and nature of hazard.

Fire/Explosion Hazard

▶ Liquid and vapour are flammable

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills	Remove all ignition sources.
Major Spills	 Clear area of personnel and move upwind.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	► Containers, even those that have been emptied, may contain explosive vapours.	
Other information	► Store in original containers in approved flammable liquid storage area.	

Conditions for safe storage, including any incompatibilities

Suitable container	 Packing as supplied by manufacturer.
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n-Butyl acetate:

reacts with water on standing to form acetic acid and n-butyl alcohol

Storage incompatibility

- ▶ reacts violently with strong oxidisers and potassium tert-butoxide
- ▶ is incompatible with caustics, strong acids and nitrates
- dissolves rubber, many plastics, resins and some coatings
- ▶ Avoid oxidising agents, acids, acid chlorides, acid anhydrides, chloroformates.

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

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	xylene	Xylene (o-, m-, p- isomers)	350 mg/m3 / 80 ppm	655 mg/m3 / 150 ppm	Not Available	Not Available
Australia Exposure Standards	ethylene glycol monoisopropyl ether	Isopropoxyethanol	106 mg/m3 / 25 ppm	Not Available	Not Available	Not Available
Australia Exposure Standards	n-butyl acetate	n-Butyl acetate	713 mg/m3 / 150 ppm	950 mg/m3 / 200 ppm	Not Available	Not Available
Australia Exposure Standards	ethanol, denatured	Ethyl alcohol	1880 mg/m3 / 1000 ppm	Not Available	Not Available	Not Available
Australia Exposure Standards	methanol	Methyl alcohol	262 mg/m3 / 200 ppm	328 mg/m3 / 250 ppm	Not Available	Sk

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
xylene	Xylenes	Not Available	Not Available	Not Available
n-butyl acetate	Butyl acetate, n-	Not Available	Not Available	Not Available
ethanol, denatured	Ethyl alcohol; (Ethanol)	Not Available	Not Available	Not Available
methanol	Methyl alcohol; (Methanol)	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
xylene	1,000 ppm	900 ppm

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ethylene glycol monoisopropyl ether	Not Available	Not Available
n-butyl acetate	10,000 ppm	1,700 [LEL] ppm
ethanol, denatured	15,000 ppm	3,300 [LEL] ppm
methanol	25,000 ppm	6,000 ppm

Exposure controls

Appropriate engineering controls	CARE: Use of a quantity of this material in confined space or poorly ventilated area, where rapid build up of concentrated atmosphere may occur, could require increased ventilation and/or protective gear Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard.
Personal protection	
Eye and face protection	► Safety glasses with side shields.
Skin protection	See Hand protection below
Hands/feet protection	▶ Wear chemical protective gloves, e.g. PVC.
Body protection	See Other protection below
Other protection	▶ Overalls.
Thermal hazards	Not Available

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the $\ computergenerated$ selection:

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Material	СРІ
BUTYL	С
BUTYL/NEOPRENE	С
HYPALON	С
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
NATURAL+NEOPRENE	С
NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
NITRILE+PVC	С
PE	С
PVA	С
PVC	С
PVDC/PE/PVDC	С
SARANEX-23	С
SARANEX-23 2-PLY	С
TEFLON	С
VITON	С
VITON/BUTYL	С
VITON/NEOPRENE	С

^{*} CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

Respiratory protection

Type AX Filter of sufficient capacity.

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 5 x ES	AX-AUS / Class 1	-	AX-PAPR-AUS / Class 1
up to 25 x ES	Air-line*	AX-2	AX-PAPR-2
up to 50 x ES	-	AX-3	-
50+ x ES	-	Air-line**	-

^ - Full-face

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

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance

clear liquid

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Physical state	Liquid	Relative density (Water = 1)	0.874
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	354
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)	128	Molecular weight (g/mol)	Not Available
Flash point (°C)	29	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Flammable.	Oxidising properties	Not Available
Upper Explosive Limit (%)	7.4	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	1.3	Volatile Component (%vol)	100
Vapour pressure (kPa)	1.3	Gas group	Not Available
Solubility in water (g/L)	Immiscible	pH as a solution(1%)	Not Available
Vapour density (Air = 1)	3.0	VOC g/L	874

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	▶ Unstable in the presence of incompatible materials.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.
Ingestion	Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result.
Skin Contact	Skin contact with the material may be harmful; systemic effects may result following absorption.
Eye	There is evidence that material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation.
Chronic	Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

POLYTHANE BRUSH	TOXICITY	IRRITATION
CLEAN	Not Available	Not Available
	TOXICITY	IRRITATION
	Inhalation (rat) LC50: 5000 ppm/4h	Eye (human): 200 ppm irritant
xylene	Intraperitoneal (Mouse) LD50: 1548 mg/kg	Eye (rabbit): 5 mg/24h SEVERE
	Intraperitoneal (Rat) LD50: 2459 mg/kg	Eye (rabbit): 87 mg mild
	Oral (Mouse) LD50: 2119 mg/kg	Skin (rabbit):500 mg/24h moderate
	Oral (rat) LD50: 4300 mg/kg	
	Subcutaneous (Rat) LD50: 1700 mg/kg	
	Not Available	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 1600 mg/kg	Eye (rabbit): 500 mg/24h - mild
ethylene glycol monoisopropyl ether	Inhalation (mouse) LC50: 1930 ppm/7h	SKIN (RABBIT): 20 MG/24H - moderate
	Inhalation (rat) LC50: 3100 mg/m3/4h	
	Intraperitoneal (mouse) LD50: 1860 mg/kg	

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	Intraperitoneal (rat) LD50: 800 mg/kg				
	Oral (mouse) LD50: 4900 mg/kg	! !			
	Oral (rat) LD50: 5660 mg/kg				
	Not Available	Not Available			
	TOXICITY	IRRITATION			
	Dermal (rabbit) LD50: 3200 mg/kg*	* [PPG]			
	Inhalation (rat) LC50: 2000 ppm/4H	Eye (human): 300 mg			
	Inhalation (Rat) LC50: 390 ppm/4h	Eye (rabbit): 20 mg (open)-SEVERE			
n-butyl acetate	Intraperitoneal (Mouse) LD50: 1230 mg/kg	Eye (rabbit): 20 n	ng/24h - moderate		
•	Oral (Guinea pig) LD50: 4700 mg/kg Skin (rabbit): 500 mg/24h-moderate				
	Oral (Rabbit) LD50: 3200 mg/kg	1			
	Oral (Rat) LD50: 10768 mg/kg	1			
	Oral (rat) LD50: 13100 mg/kg	1			
	Not Available	Not Available			
	TOXICITY	IRRITATION			
ethanol, denatured	natured				
	Not Available Not Available				
	TOXICITY IRRITATION				
	Dermal (rabbit) LD50: 15800 mg/kg	Eye (rabbit): 100 mg/24h-moderate			
methanol	Inhalation (rat) LC50: 64000 ppm/4h	Eye (rabbit): 40 mg-moderate			
	Oral (rat) LD50: 5628 mg/kg	Skin (rabbit): 20 mg/24 h-moderate			
	Not Available	Not Available			
		'			
XYLENE	Reproductive effector in rats				
ETHYLENE GLYCOL MONOISOPROPYL ETHER	The material may be irritating to the eye, with prolonged contact causing inflammation. Somnolence, excitement, analgesia, dyspnea, respiratory tract changes, haematuria recorded.				
METHANOL	The material may cause skin irritation af scaling and thickening of the skin.	fter prolonged or rep	peated exposure and may produce o	on contact skin redness, swelling, the production of vesicles,	
POLYTHANE BRUSH CLEAN, XYLENE, N-BUTYL ACETATE, ETHANOL, DENATURED	The material may produce severe irritation to the eye causing pronounced inflammation.				
Acute Toxicity	✓		Carcinogenicity	0	
Skin Irritation/Corrosion	v		Reproductivity	0	
Serious Eye Damage/Irritation	~		STOT - Single Exposure	*	
Respiratory or Skin sensitisation	0		STOT - Repeated Exposure	0	
Mutagenicity	0		Aspiration Hazard	✓	
			×	- Data required to make classification available - Data available but does not fill the criteria for classification - Data Not Available to make classification	

CMR STATUS

REPROTOXIN	xylene ILO Chemicals in the electronics industry that have toxic effects on reproduction		
SKIN	methanol Australia Exposure Standards - Skin	Sk	

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Harmful to aquatic organisms.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
xylene	HIGH (Half-life = 360 days)	LOW (Half-life = 1.83 days)

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ethylene glycol monoisopropyl ether	LOW	LOW
n-butyl acetate	LOW	LOW
ethanol, denatured	LOW (Half-life = 2.17 days)	LOW (Half-life = 5.08 days)
methanol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
xylene	MEDIUM (BCF = 740)
ethylene glycol monoisopropyl ether	LOW (LogKOW = 0.05)
n-butyl acetate	LOW (BCF = 14)
ethanol, denatured	LOW (LogKOW = -0.31)
methanol	LOW (BCF = 10)

Mobility in soil

Ingredient	Mobility
ethylene glycol monoisopropyl ether	HIGH (KOC = 1)
n-butyl acetate	LOW (KOC = 20.86)
ethanol, denatured	HIGH (KOC = 1)
methanol	HIGH (KOC = 1)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal

▶ Containers may still present a chemical hazard/ danger when empty.

SECTION 14 TRANSPORT INFORMATION

Labels Required



Land transport (ADG)

UN number	1263
Packing group	III
UN proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)
Environmental hazard	No relevant data
Transport hazard class(es)	Class 3 Subrisk Not Applicable
Special precautions for user	Special provisions 163 223 * Limited quantity 5 L

Air transport (ICAO-IATA / DGR)

UN number	1263	
Packing group	III	
UN proper shipping name	Paint (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base); Paint related material (including paint thinning or reducing compounds)	
Environmental hazard	No relevant data	
Transport hazard class(es)	ICAO/IATA Class 3 ICAO / IATA Subrisk Not Applicable ERG Code 3L	

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	Special provisions	A2 A72 A402
	Special provisions	A3 A72 A192
	Cargo Only Packing Instructions	366
	Cargo Only Maximum Qty / Pack	220 L
Special precautions for user	Passenger and Cargo Packing Instructions	355
	Passenger and Cargo Maximum Qty / Pack	60 L
	Passenger and Cargo Limited Quantity Packing Instructions	Y344
	Passenger and Cargo Limited Maximum Qty / Pack	10 L

Sea transport (IMDG-Code / GGVSee)

UN number	1263	
Packing group	III	
UN proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)	
Environmental hazard	No relevant data	
Transport hazard class(es)	IMDG Class 3 IMDG Subrisk Not Applicable	
Special precautions for user	EMS Number F-E , S-E Special provisions 163 223 955 Limited Quantities 5 L	

Transport in bulk according to Annex II of MARPOL 73 / 78 and the IBC code

Source	Ingredient	Pollution Category
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	xylene	Υ
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	n-butyl acetate	Υ
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	methanol	Υ

SECTION 15 REGULATORY INFORMATION

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

= '		
xylene(1330-20-7) is found on the following regulatory lists	"Australia Exposure Standards","Australia Inventory of Chemical Substances (AICS)","International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs","Australia Hazardous Substances Information System - Consolidated Lists"	
ethylene glycol monoisopropyl ether(109-59-1) is found on the following regulatory lists	"Australia Exposure Standards", "Australia Inventory of Chemical Substances (AICS)", "Australia Hazardous Substances Information System - Consolidated Lists"	
n-butyl acetate(123-86-4) is found on the following regulatory lists	"Australia Exposure Standards", "Australia Inventory of Chemical Substances (AICS)", "Australia Hazardous Substances Information System - Consolidated Lists"	
ethanol, denatured(64-17-5) is found on the following regulatory lists	"Australia Exposure Standards", "Australia Inventory of Chemical Substances (AICS)", "Australia Hazardous Substances Information System - Consolidated Lists"	
methanol(67-56-1) is found on the following regulatory lists	"Australia Exposure Standards", "Australia Inventory of Chemical Substances (AICS)", "Australia Hazardous Substances Information System - Consolidated Lists"	

SECTION 16 OTHER INFORMATION

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.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references

The (M)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.

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