

Altex Epoxy Accelerator

Altex Epoxy Accelerator

Altex Coatings Ltd

Chemwatch: 9-41289

Version No: 1.2

Safety Data Sheet according to HSNO Regulations

Print Date: 22/11/2013

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S.GHS.NZL.EN

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

Product Identifier

Product name:	Altex Epoxy Accelerator
Chemical Name:	
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:	

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

Relevant identified uses:	Catalyst for production of polyurethanes/ polyisocyanurates
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Details of the supplier of the safety data sheet

Registered company name:	Altex Coatings Ltd		
Address:	New Zealand		
Telephone:	+64 7 5411221		
Fax:	+64 7 5411310		
Website:	www.altexcoatings.co.nz		
Email:	Not Available		

Emergency telephone number

Association / Organisation:	Not Available		
Emergency telephone numbers:	0800 764766		
Other emergency telephone numbers:	0800 764766		

CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
+800 2436 2255	+612 9186 1132	Not Available
Once connected and if the message is not in your preferred language then please dial 01		

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. Classified as Dangerous Goods for transport purposes.

GHS Classification^[1]:

Acute Toxicity (Dermal) Category 4, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Acute Toxicity (Oral) Category 4

Legend: 1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

Determined by Chemwatch using GHS/HSNO

criteria : 6.1D (dermal), 6.1D (oral), 8.2B, 8.3A

Label elements

GHS label elements



Signal word:	DANGER
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Hazard statement(s):

H302	Harmful if swallowed
H312	Harmful in contact with skin
H314	Causes severe skin burns and eye
H318	damage Causes serious eye damage

Supplementary statement(s):

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Not Applicable

Precautionary statement(s): Prevention	
P234	Keep only in original container.
P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
Precautionary statement(s): Response	
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.
P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P302+P352	IF ON SKIN: Wash with plenty of water and soap
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
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
P312	Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.
P321	Specific treatment (see advice on this label).
P330	Rinse mouth.
P362+P364	Take off contaminated clothing and wash it before reuse.
P363	Wash contaminated clothing before reuse.
P390	Absorb spillage to prevent material damage.
Precautionary statement(s): Storage	
P405	Store locked up.
P406	Store in corrosive resistant/... container with a resistant inner liner.
Precautionary statement(s): Disposal	
(null)	(null)
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
90-72-2	100	(2,4,6-tris(dimethylamino)methyl]phenol)

SECTION 4 First aid measures

NZ Poisons Centre 0800 POISON (0800 764 766) | NZ Emergency Services: 111

Description of first aid measures

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.

For amines:

- If liquid amines come in contact with the eyes, irrigate immediately and continuously with low pressure flowing water, preferably from an eye wash fountain, for 15 to 30 minutes.
- For more effective flushing of the eyes, use the fingers to spread apart and hold open the eyelids. The eyes should then be "rolled" or moved in all directions.
- Seek immediate medical attention, preferably from an ophthalmologist.

Skin Contact:

If skin or hair contact occurs:

- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly 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.

For amines:

- In case of major exposure to liquid amine, promptly remove any contaminated clothing, including rings, watches, and shoe, preferably under a safety shower.
- Wash skin for 15 to 30 minutes with plenty of water and soap. Call a physician immediately.
- Remove and dry-clean or launder clothing soaked or soiled with this material before reuse. Dry cleaning of contaminated clothing may be more effective than normal laundering.
- Inform individuals responsible for cleaning of potential hazards associated with handling contaminated clothing.
- Discard contaminated leather articles such as shoes, belts, and watchbands.
- Note to Physician: Treat any skin burns as thermal burns. After decontamination, consider the use of cold packs and topical antibiotics.

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.

For amines:

- All employees working in areas where contact with amine catalysts is possible should be thoroughly trained in the administration of appropriate first aid procedures.

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- Experience has demonstrated that prompt administration of such aid can minimize the effects of accidental exposure.
- Promptly move the affected person away from the contaminated area to an area of fresh air.
- Keep the affected person calm and warm, but not hot.
- If breathing is difficult, oxygen may be administered by a qualified person.
- If breathing stops, give artificial respiration. Call a physician at once.
- Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema.
- Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs).
- As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested.
- Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered.

This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)

Ingestion:

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- **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.
- Transport to hospital or doctor without delay.

For amines:

- If liquid amine are ingested, have the affected person drink several glasses of water or milk.
- Do not induce vomiting.
- Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.

Indication of any immediate medical attention and special treatment needed

For acute or short-term repeated exposures to highly alkaline materials:

- Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue.

Alkalis continue to cause damage after exposure.

INGESTION:

- Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- Neutralising agents should never be given since exothermic heat reaction may compound injury.

* Catharsis and emesis are absolutely contra-indicated.

* Activated charcoal does not absorb alkali.

* Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:

- Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

For amines:

- Certain amines may cause injury to the respiratory tract and lungs if aspirated. Also, such products may cause tissue destruction leading to stricture. If lavage is performed, endotracheal and/or esophagoscopy control is suggested.
- No specific antidote is known.
- Care should be supportive and treatment based on the judgment of the physician in response to the reaction of the patient.

Laboratory animal studies have shown that a few amines are suspected of causing depletion of certain white blood cells and their precursors in lymphoid tissue. These effects may be due to an immunosuppressive mechanism.

Some persons with hyperreactive airways (e.g., asthmatic persons) may experience wheezing attacks (bronchospasm) when exposed to airway irritants.

Lung injury may result following a single massive overexposure to high vapour concentrations or multiple exposures to lower concentrations of any pulmonary irritant material.

Health effects of amines, such as skin irritation and transient corneal edema ("blue haze," "halo effect," "glauropsia"), are best prevented by means of formal worker education, industrial hygiene monitoring, and exposure control methods. Persons who are highly sensitive to the triggering effect of non-specific irritants should not be assigned to jobs in which such agents are used, handled, or manufactured.

Medical surveillance programs should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation.

Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling.

Medical personnel conducting medical surveillance of individuals potentially exposed to polyurethane amine catalysts should consider the following:

- Health history, with emphasis on the respiratory system and history of infections
- Physical examination, with emphasis on the respiratory system and the lymphoreticular organs (lymph nodes, spleen, etc.)
- Lung function tests, pre- and post-bronchodilator if indicated
- Total and differential white blood cell count
- Serum protein electrophoresis

Persons who are concurrently exposed to isocyanates also should be kept under medical surveillance.

Pre-existing medical conditions generally aggravated by exposure include skin disorders and allergies, chronic respiratory disease (e.g. bronchitis, asthma, emphysema), liver disorders, kidney disease, and eye disease.

Broadly speaking, exposure to amines, as characterised by amine catalysts, may cause effects similar to those caused by exposure to ammonia. As such, amines should be considered potentially injurious to any tissue that is directly contacted.

Inhalation of aerosol mists or vapors, especially of heated product, can result in chemical pneumonitis, pulmonary edema, laryngeal edema, and delayed scarring of the airway or other affected organs. There is no specific treatment.

Clinical management is based upon supportive treatment, similar to that for thermal burns.

Persons with major skin contact should be maintained under medical observation for at least 24 hours due to the possibility of delayed reactions.

Polyurethane Amine Catalysts: Guidelines for Safe Handling and Disposal Technical Bulletin June 2000

Alliance for Polyurethanes Industry

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility:

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

Advice for firefighters

Fire Fighting:

For amines:

- For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode.
- Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions.
- Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user.

Fire/Explosion Hazard:

- Combustible.
- Slight fire hazard when exposed to heat or flame.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acid smoke.
- Mists containing combustible materials may be explosive.

&Combustion products include:, carbon dioxide (CO2)

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

Minor Spills:

- Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material.
- Check regularly for spills and leaks.

for amines:

- If possible (i.e., without risk of contact or exposure), stop the leak.
- Contain the spilled material by diking, then neutralize.
- Next, absorb the neutralized product with clay, sawdust, vermiculite, or other inert absorbent and shovel into containers.
- Store the containers outdoors.
- Brooms and mops should be disposed of, along with any remaining absorbent, in accordance with all applicable federal, state, and local regulations and requirements.
- Decontamination of floors and other hard surfaces after the spilled material has been removed may be accomplished by using a 5% solution of acetic acid, followed by very hot water
- Dispose of the material in full accordance with all federal, state, and local laws and regulations governing the disposal of chemical wastes.

Major Spills:

- 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.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling

- **DO NOT** allow clothing wet with material to stay in contact with skin
- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Avoid contact with moisture.
- Avoid contact with incompatible materials.
- **When handling, DO NOT** eat, drink or smoke.

Other information

- 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 MSDS.
- **DO NOT** store near acids, or oxidising agents
- No smoking, naked lights, heat or ignition sources.

Conditions for safe storage, including any incompatibilities

Suitable container:

- **DO NOT** use aluminium or galvanised containers
- Lined metal can, lined metal pail/ can.

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- Plastic pail.
- Polyliner drum.
- Packing as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- Where a can is to be used as an inner package, the can must have a screwed enclosure.

Storage incompatibility:

- Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.
- Violent reaction and fire may result when amine catalysts are exposed to, or mixed with, oxidizing agents such as perchlorates, nitrates, permanganates, chromates, nitric acid, halogens, peroxides, and some cleaning solutions containing acids.
- The large amount of heat generated by the reaction of the catalyst with the oxidizing agent may be sufficient to cause vigorous boiling, which can cause the hot material to splash or splatter.
- Avoid contact with copper, aluminium and their alloys.
- Avoid reaction with oxidising agents

Package Material Incompatibilities:

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Emergency Limits

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
2,4,6-tris[(dimethylamino)methyl]phenol	5(ppm)	15(ppm)	100(ppm)	500(ppm)
Ingredient	Original IDLH		Revised IDLH	
Altex Epoxy Accelerator	Not Available		Not Available	

Exposure controls

Appropriate engineering controls

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

The basic types of engineering controls are:

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

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment.

Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in special circumstances.

Personal protection



Eye and face protection:

- Chemical goggles.
- Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens 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]

For amines:

Skin protection:

See Hand protection below

Hand protection:

- Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber
- When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

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

Body protection:

See Other protection below

Other protection:

- Overalls.
- PVC Apron.
- PVC protective suit may be required if exposure severe.
- Eyewash unit.
- Ensure there is ready access to a safety shower.

Thermal hazards:

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Recommended material(s):

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the: **"Forsberg Clothing Performance Index"**.

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:
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Not Available

Material	CPI

* 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:

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

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

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	AEK-AUS P2	-	AEK-PAPR-AUS / Class 1 P2
up to 50 x ES	-	AEK-AUS / Class 1 P2	-
up to 100 x ES	-	AEK-2 P2	AEK-PAPR-2 P2 ^

^ - 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

Not Available

Physical state	Liquid	Relative density (Water = 1)	0.97
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)	124	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 (g/L)	Immiscible	pH as a solution(1%)	Not Available
Vapour density (Air = 1)	> 1		

SECTION 10 Stability and reactivity

Reactivity:

See section 7

Chemical stability:

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Possibility of hazardous reactions:

See section 7

Conditions to avoid:

See section 7

Incompatible materials:

See section 7

Hazardous decomposition products:

See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled:

The material is not thought to produce adverse health effects 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.

Inhalation of amine vapours may cause irritation of the mucous membranes of the nose and throat and lung irritation with respiratory distress and cough. Single exposures to near lethal concentrations and repeated exposures to sublethal concentrations produces tracheitis, bronchitis, pneumonitis and pulmonary oedema. Aliphatic and alicyclic amines are generally well absorbed from the respiratory tract. Systemic effects include headache, nausea, faintness and anxiety. These effects are thought to be transient and are probably related to the pharmacodynamic action of the amines. Histamine release by aliphatic amines may produce bronchoconstriction and wheezing.

Inhalation of epoxy resin amine hardener vapours (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing "amine asthma".

Ingestion:

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Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Aliphatic and alicyclic amines are generally well absorbed from the gut. Corrosive action may cause tissue damage throughout the gastrointestinal tract. Detoxification is thought to occur in the liver, kidney and intestinal mucosa with the enzymes, monoamine oxidase and diamine oxidase (histaminase) having a significant role.

Skin Contact:

Skin contact with the material may be harmful; systemic effects may result following absorption. The material can produce chemical burns following direct contact with the skin. 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. Volatile amine vapours produce primary skin irritation and dermatitis. Direct local contact, with the lower molecular weight liquids, may produce skin burns. Percutaneous absorption of simple aliphatic amines is known to produce lethal effects often the same as that for oral administration. Cutaneous sensitisation has been recorded chiefly due to ethyleneamines. Histamine release following exposure to many aliphatic amines may result in "triple response" (white vasoconstriction, red flare and wheal) in human skin.

Eye:

The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation. Vapours of volatile amines cause eye irritation with lachrymation, conjunctivitis and minor transient corneal oedema which results in "halos" around lights (glauropsia, "blue haze", or "blue-grey haze"). Vision may become misty and halos may appear several hours after workers are exposed to the substance. This effect generally disappears spontaneously within a few hours of the end of exposure, and does not produce physiological after-effects. However oedema of the corneal epithelium, which is primarily responsible for vision disturbances, may take more than one or more days to clear, depending on the severity of exposure. Photophobia and discomfort from the roughness of the corneal surface also may occur after greater exposures. Although no detriment to the eye occurs as such, glauropsia predisposes an affected individual to physical accidents and reduces the ability to undertake skilled tasks such as driving a vehicle. Direct local contact with the liquid may produce eye damage which may be permanent in the case of the lower molecular weight species.

Chronic:

Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. There exists limited evidence that shows that skin contact with the material is capable either of inducing a sensitisation reaction in a significant number of individuals, and/or of producing positive response in experimental animals.

TOXICITY	IRRITATION
Altex Epoxy Accelerator	
Not Available	Not Available
2,4,6-tris[(dimethylamino)methyl]phenol Dermal (rabbit)	
LD50: 1280 mg/kg	[Ciba]
Inhalation (rat) LC50: >0.5 mg/l/1 hr.	[Rohm & Haas, Henkel]*
Oral (rat) LD50: 1200 mg/kg	Eye (rabbit): 0.05 mg/24h - SEVERE
Oral (rat) LD50: 2500 mg/kg *	Skin (rabbit): 2 mg/24h - SEVERE
Not Available	Not Available

Altex Epoxy Accelerator, 2,4,6-TRIS[(DIMETHYLAMINO)METHYL]PHENOL

While it is difficult to generalise about the full range of potential health effects posed by exposure to the many different amine compounds, characterised by those used in the manufacture of polyurethane and polyisocyanurate foams, it is agreed that overexposure to the majority of these materials may cause adverse health effects.

- Many amine-based compounds can induce histamine liberation, which, in turn, can trigger allergic and other physiological effects, including bronchoconstriction or bronchial asthma and rhinitis.
- Systemic symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, tachycardia (rapid heartbeat), itching, erythema (reddening of the skin), urticaria (hives), and facial edema (swelling). Systemic effects (those affecting the body) that are related to the pharmacological action of amines are usually transient.

Typically, there are four routes of possible or potential exposure: inhalation, skin contact, eye contact, and ingestion.

Inhalation:

Inhalation of vapors may, depending upon the physical and chemical properties of the specific product and the degree and length of exposure, result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs.

Products with higher vapour pressures have a greater potential for higher airborne concentrations. This increases the probability of worker exposure.

Higher concentrations of certain amines can produce severe respiratory irritation, characterised by nasal discharge, coughing, difficulty in breathing, and chest pains.

Acute Toxicity:	Acute Toxicity (Dermal) Category 4 Acute Toxicity (Oral) Category 4	Carcinogenicity:	Not Applicable
Skin Irritation/Corrosion:	Skin Corrosion/Irritation Category 1B	Reproductivity:	Not Applicable
Serious Eye Damage/Irritation:	Serious Eye Damage Category 1	STOT - Single Exposure:	Not Applicable
Respiratory or Skin sensitisation:	Not Applicable	STOT - Repeated Exposure:	Not Applicable
Mutagenicity:	Not Applicable	Aspiration Hazard:	Not Applicable

CMR STATUS

SECTION 12 Ecological information

Toxicity

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
Not Available	Not Available	Not Available

Bioaccumulative potential

Ingredient	Bioaccumulation

Altex Epoxy Accelerator

Not Available

Not Available

Mobility in soil

Ingredient	Mobility
Not Available	Not Available

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal:

- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and MSDS and observe all notices pertaining to the product.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Treat and neutralise at an approved treatment plant.
- Treatment should involve: Neutralisation with suitable dilute acid followed by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material).
- Decontaminate empty containers.

Insure that the disposal of material is carried out in accordance with Hazardous Substances (Disposal) Regulations 2001.

SECTION 14 Transport information

Labels Required:



Marine Pollutant: NO

HAZCHEM: 2X

Land transport (UN)

UN number	3066	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: 8 Subrisk:	Special precautions for user	Special provisions 163; 223 limited quantity 5 L

Air transport (ICAO-IATA / DGR)

UN number	3066	Packing group	III
UN proper shipping name	Paint corrosive (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base); Paint related material corrosive (including paint thinning or reducing compounds)	Environmental hazard	No relevant data
Transport hazard class(es)	ICAO/IATA Class: 8 ICAO / IATA Subrisk: ERG Code: 8L	Special precautions for user	Special provisions: A3A72A803 Cargo Only Packing Instructions: 856 Cargo Only Maximum Qty / Pack: 60 L Passenger and Cargo Packing Instructions: 852 Passenger and Cargo Maximum Qty / Pack: 5 L Passenger and Cargo Limited Quantity Packing Instructions: Y841 Passenger and Cargo Maximum Qty / Pack: 1 L

Sea transport (IMDG-Code / GGVSee)

UN number	3066	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

Altex Epoxy Accelerator

Transport hazard class(es)	IMDG Class: 8	Special precautions for user	EMS Number: F-A,S-B
	IMDG Subrisk:		Special provisions: 163 223
			Limited Quantities: 5 L

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
HSR002491	Additives, Process Chemicals and Raw Materials (Corrosive) Group Standard 2006

2,4,6-tris[(dimethylamino)methyl]phenol (90-72-2) is found on the following regulatory lists

"New Zealand Hazardous Substances and New Organisms (HSNO) Act - Chemicals (single components)", "Sigma-Aldrich Transport Information", "New Zealand Inventory of Chemicals (NZIoC)", "OECD List of High Production Volume (HPV) Chemicals", "International Council of Chemical Associations (ICCA) - High Production Volume List", "New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data", "New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals", "Regulations concerning the International Carriage of Dangerous Goods by Rail - Table A: Dangerous Goods List - RID 2013 (English)", "International Air Transport Association (IATA) Dangerous Goods Regulations", "International Maritime Dangerous Goods Requirements (IMDG Code) - Substance Index", "International Maritime Dangerous Goods Requirements (IMDG Code)"

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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