



DREWGARD® XTA

Drew Marine

Chemwatch: 28-7487

Version No: 5.1.1.1

Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

Chemwatch Hazard Alert Code: 2

Issue Date: 01/01/2013

Print Date: 12/10/2014

Initial Date: Not Available

S.GHS.USA.EN

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

Product Identifier

| | |
|-------------------------------|----------------|
| Product name | DREWGARD® XTA |
| Chemical Name | Not Applicable |
| Proper shipping name | Not Applicable |
| 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

| | |
|--------------------------|---|
| Relevant identified uses | Use according to manufacturer's directions. |
|--------------------------|---|

Details of the manufacturer/importer

| | |
|-------------------------|--|
| Registered company name | Drew Marine |
| Address | 100 South Jefferson Road Whippany 07981 NJ United States |
| Telephone | 973 526-5700. |
| Fax | Not Available |
| Website | Not Available |
| Email | Not Available |

Emergency telephone number

| | |
|-----------------------------------|--|
| Association / Organisation | Not Available |
| Emergency telephone numbers | The numbers below are for EMERGENCY USE ONLY. Use the corporate number above for all other calls. |
| Other emergency telephone numbers | CHEMWATCH: From within the US and CANADA: 1 877-715-9305 OR call + 613 9573 3112. From outside the US and Canada: + 800 2436 2255 (+800 CHEMCALL) or +613 9573 3112 |

CHEMWATCH EMERGENCY RESPONSE

| Primary Number | Alternative Number 1 | Alternative Number 2 |
|----------------|----------------------|----------------------|
| 877 715 9305 | +612 9186 1132 | Not Available |

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

Una vez conectado y si el mensaje no está en su idioma preferido, por favor marque 02

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

| | |
|--------------------|----------------------------------|
| GHS Classification | Acute Toxicity (Oral) Category 4 |
|--------------------|----------------------------------|

Label elements

| | |
|--------------------|--|
| GHS label elements | |
|--------------------|--|

SIGNAL WORD

WARNING

Hazard statement(s)

| | |
|------|----------------------|
| H302 | Harmful if swallowed |
|------|----------------------|

Supplementary statement(s)

Not Applicable

Continued...

Precautionary statement(s): Prevention

| | |
|-------------|---|
| P264 | Wash all exposed external body areas thoroughly after handling. |
| P270 | Do not eat, drink or smoke when using this product. |

Precautionary statement(s): Response

| | |
|------------------|---|
| P301+P312 | IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider/if you feel unwell. |
| P330 | Rinse mouth. |

Precautionary statement(s): Storage

Not Applicable

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 |
|-----------|-----------|---|
| 107-21-1 | 25-40 | ethylene glycol |
| 3164-85-0 | 10-35 | potassium 2-ethylhexanoate |
| 99-96-7 | 1-5 | p-hydroxybenzoic acid |
| 111-46-6 | 1-2 | diethylene glycol |
| | | Note: Manufacturer has supplied full ingredient |
| | | information to allow CHEMWATCH assessment. |
| 7732-18-5 | balance | water |

Note: Manufacturer has supplied full ingredient information to allow CHEMWATCH assessment.

SECTION 4 FIRST AID MEASURES**Description of first aid measures**

| | |
|---------------------|---|
| Eye Contact | <p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> 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 | <p>If skin contact occurs:</p> <ul style="list-style-type: none"> 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 style="list-style-type: none"> If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary. |
| Ingestion | <ul style="list-style-type: none"> IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist. If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS. <p>Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:</p> <ul style="list-style-type: none"> INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. <p>NOTE: Wear a protective glove when inducing vomiting by mechanical means.</p> |

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

To treat poisoning by the higher aliphatic alcohols (up to C7):

- Gastric lavage with copious amounts of water.
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxygen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5]

BASIC TREATMENT

- Establish a patent airway with suction where necessary.

Continued...

- ▶ 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 shock.
- ▶ Monitor and treat, where necessary, for pulmonary oedema.
- ▶ Anticipate and treat, where necessary, for seizures.
- ▶ **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

- ▶ 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.
- ▶ If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema.
- ▶ Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- ▶ 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.
- ▶ Acidosis may respond to hyperventilation and bicarbonate therapy.
- ▶ Haemodialysis might be considered in patients with severe intoxication.
- ▶ Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

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

[Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- ▶ Alcohol stable 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

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- ▶ Wear full body protective clothing with breathing apparatus.
- ▶ Prevent, by any means available, spillage from entering drains or water course.
- ▶ Use water delivered as a fine spray to control fire and cool adjacent area.
- ▶ Avoid spraying water onto liquid pools.
- ▶ **DO NOT** approach containers suspected to be hot.
- ▶ Cool fire exposed containers with water spray from a protected location.
- ▶ If safe to do so, remove containers from path of fire.

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 acrid smoke.
 - ▶ Mists containing combustible materials may be explosive.
- Combustion products include: carbon dioxide (CO₂), other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills

- Slippery when spilt.
- ▶ Remove all ignition sources.
 - ▶ Clean up all spills immediately.
 - ▶ Avoid breathing vapours and contact with skin and eyes.
 - ▶ Control personal contact with the substance, by using protective equipment.
 - ▶ Contain and absorb spill with sand, earth, inert material or vermiculite.
 - ▶ Wipe up.
 - ▶ Place in a suitable, labelled container for waste disposal.

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|--------------|--|
| Major Spills | <p>Slippery when spilt. Moderate hazard.</p> <ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ No smoking, naked lights or ignition sources. ▶ Increase ventilation. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. ▶ Absorb remaining product with sand, earth or vermiculite. ▶ Collect solid residues and seal in labelled drums for disposal. ▶ Wash area 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 MSDS. |

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

| | |
|-------------------|--|
| Safe handling | <ul style="list-style-type: none"> ▶ 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. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ Avoid smoking, naked lights or ignition sources. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use. ▶ Avoid physical damage to containers. ▶ Always wash hands with soap and water after handling. ▶ Work clothes should be laundered separately. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this MSDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions. |
| Other information | <ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ No smoking, naked lights or ignition sources. ▶ 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. |

Conditions for safe storage, including any incompatibilities

| | |
|-------------------------|--|
| Suitable container | <ul style="list-style-type: none"> ▶ DO NOT use aluminium or galvanised containers ▶ Metal can or drum ▶ Packaging as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks. |
| Storage incompatibility | <p>▶ Glycols and their ethers undergo violent decomposition in contact with 70% perchloric acid. This seems likely to involve formation of the glycol perchlorate esters (after scission of ethers) which are explosive, those of ethylene glycol and 3-chloro-1,2-propanediol being more powerful than glyceryl nitrate, and the former so sensitive that it explodes on addition of water.</p> <p>Alcohols</p> <ul style="list-style-type: none"> ▶ are incompatible with strong acids, acid chlorides, acid anhydrides, oxidising and reducing agents. ▶ reacts, possibly violently, with alkaline metals and alkaline earth metals to produce hydrogen ▶ react with strong acids, strong caustics, aliphatic amines, isocyanates, acetaldehyde, benzoyl peroxide, chromic acid, chromium oxide, dialkylzincs, dichlorine oxide, ethylene oxide, hypochlorous acid, isopropyl chlorocarbonate, lithium tetrahydroaluminate, nitrogen dioxide, pentafluoroguanidine, phosphorus halides, phosphorus pentasulfide, tangerine oil, triethylaluminium, triisobutylaluminium ▶ should not be heated above 49 deg. C. when in contact with aluminium equipment <p>Ethylene glycol:</p> <ul style="list-style-type: none"> ▶ reacts violently with oxidisers and oxidising acids, sulfuric acid, chlorosulfonic acid, chromyl chloride, perchloric acid ▶ forms explosive mixtures with sodium perchlorate ▶ is incompatible with strong acids, caustics, aliphatic amines, isocyanates, chlorosulfonic acid, oleum, potassium bichromate, phosphorus pentasulfide, sodium chlorite ▶ Avoid strong acids, bases. |

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 |
|---|-----------------|--|---------------|---------------|---------------|---------------------------|
| US ACGIH Threshold Limit Values (TLV) | ethylene glycol | ‡ Ethylene glycol | Not Available | Not Available | 100 mg/m3 | TLV® Basis: URT & eye irr |
| US NIOSH Recommended Exposure Limits (RELs) | ethylene glycol | 1,2-Dihydroxyethane; 1,2-Ethanediol; Glycol; Glycol alcohol; Monoethylene glycol | Not Available | Not Available | Not Available | See Appendix D |

Continued...






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EMERGENCY LIMITS

| Ingredient | TEEL-0 | TEEL-1 | TEEL-2 | TEEL-3 |
|---------------|---------------|---------------|---------------|---------------|
| DREWGARD® XTA | Not Available | Not Available | Not Available | Not Available |

| Ingredient | Original IDLH | Revised IDLH |
|----------------------------|---------------|---------------|
| ethylene glycol | Not Available | Not Available |
| potassium 2-ethylhexanoate | Not Available | Not Available |
| p-hydroxybenzoic acid | Not Available | Not Available |
| diethylene glycol | Not Available | Not Available |
| water | 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 specific circumstances. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Provide adequate ventilation in warehouse or closed storage areas. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant. | | | | | | | | | | |
| | <table><tr><td>Type of Contaminant:</td><td>Air Speed:</td></tr><tr><td>solvent, vapours, degreasing etc., evaporating from tank (in still air).</td><td>0.25-0.5 m/s (50-100 f/min)</td></tr><tr><td>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)</td><td>0.5-1 m/s (100-200 f/min.)</td></tr><tr><td>direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)</td><td>1-2.5 m/s (200-500 f/min.)</td></tr><tr><td>grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).</td><td>2.5-10 m/s (500-2000 f/min.)</td></tr></table> | Type of Contaminant: | Air Speed: | solvent, vapours, degreasing etc., evaporating from tank (in still air). | 0.25-0.5 m/s (50-100 f/min) | aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation) | 0.5-1 m/s (100-200 f/min.) | direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion) | 1-2.5 m/s (200-500 f/min.) | grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). | 2.5-10 m/s (500-2000 f/min.) |
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| grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). | 2.5-10 m/s (500-2000 f/min.) | | | | | | | | | | |
| Within each range the appropriate value depends on: | | | | | | | | | | | |
| <table><tr><td>Lower end of the range</td><td>Upper end of the range</td></tr><tr><td>1: Room air currents minimal or favourable to capture</td><td>1: Disturbing room air currents</td></tr><tr><td>2: Contaminants of low toxicity or of nuisance value only.</td><td>2: Contaminants of high toxicity</td></tr><tr><td>3: Intermittent, low production.</td><td>3: High production, heavy use</td></tr><tr><td>4: Large hood or large air mass in motion</td><td>4: Small hood-local control only</td></tr></table> | 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 | |
| Lower end of the range | Upper end of the range | | | | | | | | | | |
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| 2: Contaminants of low toxicity or of nuisance value only. | 2: Contaminants of high toxicity | | | | | | | | | | |
| 3: Intermittent, low production. | 3: High production, heavy use | | | | | | | | | | |
| 4: Large hood or large air mass in motion | 4: Small hood-local control only | | | | | | | | | | |
| | Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used. | | | | | | | | | | |
| Personal protection | <div></div> | | | | | | | | | | |
| Eye and face protection | <div><ul style="list-style-type: none">▶ Safety glasses with side shields.▶ Chemical goggles.▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]</div> | | | | | | | | | | |
| Skin protection | See Hand protection below | | | | | | | | | | |
| Hands/feet protection | <div><ul style="list-style-type: none">▶ Wear chemical protective gloves, e.g. PVC.▶ Wear safety footwear or safety gumboots, e.g. Rubber<p>NOTE:</p><ul style="list-style-type: none">▶ 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.<p>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.</p><p>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.</p><p>Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:</p><ul style="list-style-type: none">▶ frequency and duration of contact,▶ chemical resistance of glove material,▶ glove thickness and</div> | | | | | | | | | | |

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| | <ul style="list-style-type: none"> ▶ dexterity <p>Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).</p> <ul style="list-style-type: none"> ▶ 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. <p>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.</p> |
| Body protection | See Other protection below |
| Other protection | <ul style="list-style-type: none"> ▶ Overalls. ▶ P.V.C. apron. ▶ Barrier cream. ▶ Skin cleansing cream. ▶ Eye wash unit. |
| 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 **computer-generated** selection:

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| Material | CPI |
|----------|-----|
| NITRILE | A |

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

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

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

| Required Minimum Protection Factor | Half-Face Respirator | Full-Face Respirator | Powered Air Respirator |
|------------------------------------|----------------------|----------------------|-------------------------|
| up to 10 x ES | A-AUS P2 | - | A-PAPR-AUS / Class 1 P2 |
| up to 50 x ES | - | A-AUS / Class 1 P2 | - |
| up to 100 x ES | - | A-2 P2 | A-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 | Green liquid; mixes with water. | | |
| Physical state | Liquid | Relative density (Water = 1) | 1.09 @20C |
| Odour | Not Available | Partition coefficient n-octanol / water | Not Available |
| Odour threshold | Not Available | Auto-ignition temperature (°C) | Not Available |
| pH (as supplied) | 9.5 | Decomposition temperature | Not Available |
| Melting point / freezing point (°C) | Not Available | Viscosity (cSt) | Not Available |
| Initial boiling point and boiling range (°C) | 100 | Molecular weight (g/mol) | Not Applicable |
| Flash point (°C) | 100 | Taste | Not Available |
| Evaporation rate | 1< ethyl ether | Explosive properties | Not Available |
| Flammability | Not Applicable | Oxidising properties | Not Available |
| Upper Explosive Limit (%) | 15.3 | Surface Tension (dyn/cm or mN/m) | Not Available |
| Lower Explosive Limit (%) | 3.2 | Volatile Component (%vol) | Not Available |
| Vapour pressure (kPa) | 3@ 25C | Gas group | Not Available |
| Solubility in water (g/L) | Miscible | pH as a solution(1%) | Not Available |
| Vapour density (Air = 1) | Not Available | VOC g/L | Not Available |

SECTION 10 STABILITY AND REACTIVITY

| | |
|---------------------------|--|
| Reactivity | See section 7 |
| Chemical stability | <ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur. |

DREWGARD® XTA

| | |
|---|---------------|
| Possibility of hazardous reactions | See section 7 |
| Conditions to avoid | See section 7 |
| Incompatible materials | See section 7 |
| Hazardous decomposition products | See section 5 |

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

| | |
|---------------------|---|
| Inhaled | Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo. |
| Ingestion | Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. |
| Skin Contact | <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p> <p>The material may produce mild skin irritation; limited evidence or practical experience suggests, that the material either:</p> <ul style="list-style-type: none"> ► produces mild inflammation of the skin in a substantial number of individuals following direct contact, and/or ► produces significant, but mild, inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammation being present twenty-four hours or more after the end of the exposure period. <p>Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (non allergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.</p> |
| Eye | Limited evidence or practical experience suggests, that the material may cause moderate eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged exposure may cause moderate inflammation (similar to windburn) characterised by a temporary redness of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur. |
| Chronic | Prolonged or repeated skin contact may cause degreasing with drying, cracking and dermatitis following. Human volunteers exposed to ethylene glycol, 20 to 22 hours/day at mean daily concentrations ranging from 1.4 to 27 ppm for about 4 weeks complained of throat irritation, mild headache and low backache. Complaints became marked when the concentration in the exposure chamber was raised above 56 mg/m3 for part of the day. The most common complaint was irritation of the upper respiratory tract. Concentrations above 80 ppm were intolerable with a burning sensation along the trachea and a burning cough. Excessively exposed workers have reported drowsiness. |

| | | |
|-----------------------------------|---|----------------------------------|
| DREWGARD® XTA | TOXICITY | IRRITATION |
| | Not Available | Not Available |
| ethylene glycol | TOXICITY | IRRITATION |
| | Dermal (rabbit) LD50: 9530 mg/kg | Eye (rabbit): 100 mg/1h - mild |
| | Inhalation (rat) LC50: 50100 mg/m3/8 hr | Eye (rabbit): 12 mg/m3/3D |
| | Oral (rat) LD50: 4700 mg/kg | Eye (rabbit): 1440mg/6h-moderate |
| | | Eye (rabbit): 500 mg/24h - mild |
| | | Skin (rabbit): 555 mg(open)-mild |
| | Not Available | Not Available |
| potassium 2-ethylhexanoate | TOXICITY | IRRITATION |
| | Not Available | Not Available |
| p-hydroxybenzoic acid | TOXICITY | IRRITATION |
| | Intraperitoneal (mouse) LD50: 210 mg/kg | |
| | Intraperitoneal (rat) LD50: 340 mg/kg | |
| | Oral (mouse) LD50: 2200 mg/kg | |
| | Subcutaneous (mouse) LD50: 1050 mg/kg | |
| | Not Available | Not Available |
| diethylene glycol | TOXICITY | IRRITATION |
| | Dermal (rabbit) LD50: 11890 mg/kg | Eye (rabbit) 50 mg mild |
| | Oral (rat) LD50: 12565 mg/kg | Skin (human): 112 mg/3d-I mild |
| | | Skin (rabbit): 500 mg mild |
| | Not Available | Not Available |
| water | TOXICITY | IRRITATION |
| | Not Available | Not Available |

Continued...

Not available. Refer to individual constituents.

ETHYLENE GLYCOL

For ethylene glycol:

Ethylene glycol is quickly and extensively absorbed through the gastrointestinal tract. Limited information suggests that it is also absorbed through the respiratory tract; dermal absorption is apparently slow. Following absorption, ethylene glycol is distributed throughout the body according to total body water. In most mammalian species, including humans, ethylene glycol is initially metabolised by alcohol

dehydrogenase to form glycolaldehyde, which is rapidly converted to glycolic acid and glyoxal by aldehyde oxidase and aldehyde dehydrogenase. These metabolites are oxidised to glyoxylate; glyoxylate may be further metabolised to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate CO₂, which is one of the major elimination products of ethylene glycol. In addition to exhaled CO₂, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid. Elimination of ethylene glycol from the plasma in both humans and laboratory animals is rapid after oral exposure; elimination half-lives are in the range of 1-4 hours in most species tested.

Respiratory Effects. Respiratory system involvement occurs 12-24 hours after ingestion of sufficient amounts of ethylene glycol and is considered to be part of a second stage in ethylene glycol poisoning. The symptoms include hyperventilation, shallow rapid breathing, and generalized pulmonary edema with calcium oxalate crystals occasionally present in the lung parenchyma. Respiratory system involvement appears to be dose-dependent and occurs concomitantly with cardiovascular changes. Pulmonary infiltrates and other changes compatible with adult respiratory distress syndrome (ARDS) may characterise the second stage of ethylene glycol poisoning. Pulmonary oedema can be secondary to cardiac failure, ARDS, or aspiration of gastric contents. Symptoms related to acidosis such as hyperpnea and tachypnea are frequently observed; however, major respiratory morbidities such as pulmonary edema and bronchopneumonia are relatively rare and usually only observed with extreme poisoning (e.g., in only 5 of 36 severely poisoned cases).

Cardiovascular Effects. Cardiovascular system involvement in humans occurs at the same time as respiratory system involvement, during the second phase of oral ethylene glycol poisoning, which is 12- 24 hours after acute exposure. The symptoms of cardiac involvement include tachycardia, ventricular gallop and cardiac enlargement. Ingestion of ethylene glycol may also cause hypertension or hypotension, which may progress to cardiogenic shock. Myocarditis has been observed at autopsy in cases of people who died following acute ingestion of ethylene glycol. As in the case of respiratory effects, cardiovascular involvement occurs with ingestion of relatively high doses of ethylene glycol.

Nevertheless, circulatory disturbances are a rare occurrence, having been reported in only 8 of 36 severely poisoned cases. Therefore, it appears that acute exposure to high levels of ethylene glycol can cause serious cardiovascular effects in humans. The effects of a long-term, low-dose exposure are unknown.

Gastrointestinal Effects. Nausea, vomiting with or without blood, pyrosis, and abdominal cramping and pain are common early effects of acute ethylene glycol ingestion. Acute effects of ethylene glycol ingestion in one patient included intermittent diarrhea and abdominal pain, which were attributed to mild colonic ischaemia; severe abdominal pain secondary to colonic stricture and perforation developed 3 months after ingestion, and histology of the resected colon showed birefringent crystals highly suggestive of oxalate deposition.

Musculoskeletal Effects. Reported musculoskeletal effects in cases of acute ethylene glycol poisoning have included diffuse muscle tenderness and myalgias associated with elevated serum creatinine phosphokinase levels, and myoclonic jerks and tetanic contractions associated with hypocalcaemia.

Hepatic Effects. Central hydropic or fatty degeneration, parenchymal necrosis, and calcium oxalate crystals in the liver have been observed at autopsy in cases of people who died following acute ingestion of ethylene glycol.

Renal Effects. Adverse renal effects after ethylene glycol ingestion in humans can be observed during the third stage of ethylene glycol toxicity 24-72 hours after acute exposure. The hallmark of renal toxicity is the presence of birefringent calcium oxalate monohydrate crystals deposited in renal tubules and their presence in urine after ingestion of relatively high amounts of ethylene glycol. Other signs of nephrotoxicity can include tubular cell degeneration and necrosis and tubular interstitial inflammation. If untreated, the degree of renal damage caused by high doses of ethylene glycol progresses and leads to haematuria, proteinuria, decreased renal function, oliguria, anuria, and ultimately renal failure. These changes in the kidney are linked to acute tubular necrosis but normal or near normal renal function can return with adequate supportive therapy.

Metabolic Effects. One of the major adverse effects following acute oral exposure of humans to ethylene glycol involves metabolic changes. These changes occur as early as 12 hours after ethylene glycol exposure. Ethylene glycol intoxication is accompanied by metabolic acidosis which is manifested by decreased pH and bicarbonate content of serum and other bodily fluids caused by accumulation of excess glycolic acid. Other characteristic metabolic effects of ethylene glycol poisoning are increased serum anion gap, increased osmolal gap, and hypocalcaemia. Serum anion gap is calculated from concentrations of sodium, chloride, and bicarbonate, is normally 12-16 mM, and is typically elevated after ethylene glycol ingestion due to increases in unmeasured metabolite anions (mainly glycolate).

Neurological Effects: Adverse neurological reactions are among the first symptoms to appear in humans after ethylene glycol ingestion. These early neurotoxic effects are also the only symptoms attributed to unmetabolised ethylene glycol. Together with metabolic changes, they occur during the period of 30 minutes to 12 hours after exposure and are considered to be part of the first stage in ethylene glycol intoxication. In cases of acute intoxication, in which a large amount of ethylene glycol is ingested over a very short time period, there is a progression of neurological manifestations which, if not treated, may lead to generalized seizures and coma. Ataxia, slurred speech, confusion, and somnolence are common during the initial phase of ethylene glycol intoxication as are irritation, restlessness, and disorientation. Cerebral edema and crystalline deposits of calcium oxalate in the walls of small blood vessels in the brain were found at autopsy in people who died after acute ethylene glycol ingestion.

Effects on cranial nerves appear late (generally 5-20 days post-ingestion), are relatively rare, and according to some investigators constitute a fourth, late cerebral phase in ethylene glycol intoxication. Clinical manifestations of the cranial neuropathy commonly involve lower motor neurons of the facial and bulbar nerves and are reversible over many months.

Reproductive Effects: Reproductive function after intermediate-duration oral exposure to ethylene glycol has been tested in three multi-generation studies (one in rats and two in mice) and several shorter studies (15-20 days in rats and mice). In these studies, effects on fertility, foetal viability, and male reproductive organs were observed in mice, while the only effect in rats was an increase in gestational duration.

Developmental Effects: The developmental toxicity of ethylene glycol has been assessed in several acute-duration studies using mice, rats, and rabbits. Available studies indicate that malformations, especially skeletal malformations occur in both mice and rats exposed during gestation; mice are apparently more sensitive to the developmental effects of ethylene glycol. Other evidence of embryotoxicity in laboratory animals exposed to ethylene glycol exposure includes reduction in foetal body weight.

Cancer: No studies were located regarding cancer effects in humans or animals after dermal exposure to ethylene glycol.

Genotoxic Effects: Studies in humans have not addressed the genotoxic effects of ethylene glycol. However, available *in vivo* and *in vitro* laboratory studies provide consistently negative genotoxicity results for ethylene glycol.

[Estimated Lethal Dose (human) 100 ml; RTECS quoted by Orica] Substance is reproductive effector in rats (birth defects). Mutagenic to rat cells.

P-HYDROXYBENZOIC ACID

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

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.

Continued...

DREWGARD® XTA

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|-----------------------------------|--|
| DIETHYLENE GLYCOL | The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. |
| POTASSIUM 2-ETHYLHEXANOATE, WATER | No significant acute toxicological data identified in literature search. |

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

Legend: ✓ – Data required to make classification available
 ✗ – Data available but does not fill the criteria for classification
 ⊘ – Data Not Available to make classification

CMR STATUS

| | | | |
|-------------|-----------------|--|---|
| RESPIRATORY | ethylene glycol | US - California OEHH/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs) - Respiratory | X |
|-------------|-----------------|--|---|

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

DO NOT discharge into sewer or waterways.

Persistence and degradability

| Ingredient | Persistence: Water/Soil | Persistence: Air |
|-----------------------|---------------------------|-----------------------------|
| ethylene glycol | low (Half-life = 24 days) | low (Half-life = 3.46 days) |
| p-hydroxybenzoic acid | high | high |
| diethylene glycol | high | high |
| water | high | high |

Bioaccumulative potential

| Ingredient | Bioaccumulation |
|-----------------------|-------------------|
| ethylene glycol | low (BCF = 3.162) |
| p-hydroxybenzoic acid | low (BCF = 3.162) |
| diethylene glycol | low (BCF = 3.162) |
| water | low (BCF = 3.162) |

Mobility in soil

| Ingredient | Mobility |
|-----------------------|-------------------|
| ethylene glycol | high (KOC = 1) |
| p-hydroxybenzoic acid | low (KOC = 23.47) |
| diethylene glycol | high (KOC = 1) |
| water | low (KOC = 14.3) |

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

| | |
|------------------------------|---|
| Product / Packaging disposal | <ul style="list-style-type: none"> Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. Where possible retain label warnings and MSDS and observe all notices pertaining to the product. DO NOT allow wash water from cleaning or process equipment to enter drains. It may be necessary to collect all wash water for treatment before disposal. In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. Where in doubt contact the responsible authority. Recycle wherever possible or consult manufacturer for recycling options. Consult State Land Waste Authority for disposal. Bury or incinerate residue at an approved site. Recycle containers if possible, or dispose of in an authorised landfill. |
|------------------------------|---|

SECTION 14 TRANSPORT INFORMATION

Labels Required

| | |
|------------------|----|
| Marine Pollutant | NO |
|------------------|----|

Continued...

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

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

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

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

| Source | Ingredient | Pollution Category |
|---|-----------------|--------------------|
| IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk | ethylene glycol | Y |

SECTION 15 REGULATORY INFORMATION

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

| | |
|--|---|
| ethylene glycol(107-21-1) is found on the following regulatory lists | "US ATSDR Minimal Risk Levels for Hazardous Substances (MRLs)", "US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - Hawaii Air Contaminant Limits", "US ACGIH Threshold Limit Values (TLV) - Carcinogens", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US - Michigan Exposure Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "US - Washington Toxic air pollutants and their ASIL, SQER and de minimis emission values", "US NIOSH Recommended Exposure Limits (RELs)", "US - Alaska Limits for Air Contaminants", "US - Washington Permissible exposure limits of air contaminants", "US ACGIH Threshold Limit Values (TLV) - Notice of Intended Changes", "US Spacecraft Maximum Allowable Concentrations (SMACs) for Airborne Contaminants", "US - Minnesota Permissible Exposure Limits (PELs)", "US - California OEHHA/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs)", "US ACGIH Threshold Limit Values (TLV)", "US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory" |
| potassium 2-ethylhexanoate(3164-85-0) is found on the following regulatory lists | "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory" |
| p-hydroxybenzoic acid(99-96-7) is found on the following regulatory lists | "US AIHA Workplace Environmental Exposure Levels (WEELs)", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory" |
| diethylene glycol(111-46-6) is found on the following regulatory lists | "US AIHA Workplace Environmental Exposure Levels (WEELs)", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory" |
| water(7732-18-5) is found on the following regulatory lists | "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory" |

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.