

# Dunlop Wide Joint Grout Ardex (Ardex Australia)

Chemwatch: 5421-64 Version No: 2.1.1.1 Safety Data Sheet according to WHS and ADG requirements

#### Chemwatch Hazard Alert Code: 3

Issue Date: 01/09/2020 Print Date: 01/09/2020 S.GHS.AUS.EN

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

#### **Product Identifier**

Product name	Dunlop Wide Joint Grout
Synonyms	tiling grout
Other means of identification	Not Available

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

Relevant identified uses Grouting material for filling joints around ceramic wall and floor tiles after fixing to substrate.

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

Registered company name	Ardex (Ardex Australia)	
Address	0 Powers Road Seven Hills NSW 2147 Australia	
Telephone	224 070	
Fax	300 780 102	
Website	Not Available	
Email	Not Available	

#### Emergency telephone number

Association / Organisation	Ardex (Ardex Australia)	
Emergency telephone numbers	1800 224 070 (Mon-Fri, 9am-5pm)	
Other emergency telephone numbers	Not Available	

## **SECTION 2 Hazards identification**

#### Classification of the substance or mixture

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

Che	mWatch	Hazard	Ratings
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	Min	Max	
Flammability	0		
Toxicity	1		0 = Minimum
Body Contact	3	1	1 = Low
Reactivity	0		2 = Moderate
Chronic	3		3 = High 4 = Extreme

Poisons Schedule Not Applicable	
Classification [1] Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Germ cell mutagenicity Category 2, Carcinogenicity Category 1A, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)	
Legend:	1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

#### Label elements

Hazard pictogram(s)



Hazard statement(s)		
H315	Causes skin irritation.	
H318	Causes serious eye damage.	
H317	May cause an allergic skin reaction.	
H341	Suspected of causing genetic defects.	
H350	May cause cancer.	
H335	May cause respiratory irritation.	

## Precautionary statement(s) Prevention

Signal word Danger

P201	Obtain special instructions before use.	
P271 Use only outdoors or in a well-ventilated area.		
P280 Wear protective gloves/protective clothing/eye protection/face protection.		
P281	Use personal protective equipment as required.	

# Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P308+P313	P308+P313 IF exposed or concerned: Get medical advice/attention.	
P310	Immediately call a POISON CENTER or doctor/physician.	
P321	P321 Specific treatment (see advice on this label).	

# Precautionary statement(s) Storage

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

# Precautionary statement(s) Disposal

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

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

## Substances

See section below for composition of Mixtures

#### Mixtures

CAS No	%[weight]	Name
14808-60-7.	>60	graded sand
65997-15-1	10-30	portland cement
14808-60-7	<5	silica crystalline - quartz
10101-41-4	<5	gypsum
1317-65-3	<5	limestone
13463-67-7	<1	titanium dioxide
Not Available	balance	Ingredients determined not to be hazardous

# **SECTION 4 First aid measures**

## Description of first aid measures

Eye Contact	<ul> <li>If this product comes in contact with the eyes:</li> <li>Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>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.</li> <li>Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> <li>Transport to hospital or doctor without delay.</li> <li>Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	<ul> <li>If skin or hair contact occurs:</li> <li>Immediately flush body and clothes with large amounts of water, using safety shower if available.</li> <li>Quickly remove all contaminated clothing, including footwear.</li> <li>Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.</li> <li>Transport to hospital, or doctor.</li> </ul>
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>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.</li> <li>Transport to hospital, or doctor, without delay.</li> </ul>

Ingestion	<ul> <li>If swallowed do NOT induce vomiting.</li> <li>If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>Observe the patient carefully.</li> <li>Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>Seek medical advice.</li> </ul>
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Indication of any immediate medical attention and special treatment needed Treat symptomatically.

## SECTION 5 Firefighting measures

#### Extinguishing media

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

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

Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Use fire fighting procedures suitable for surrounding area.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered a significant fire risk, however containers may burn.</li> <li>Decomposition may produce toxic fumes of: silicon dioxide (SiO2) metal oxides</li> <li>May emit poisonous fumes.</li> <li>May emit corrosive fumes.</li> </ul>
HAZCHEM	Not Applicable

#### **SECTION 6 Accidental release measures**

#### Personal precautions, protective equipment and emergency procedures

See section 8

### Environmental precautions

See section 12

## Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Remove all ignition sources.</li> <li>Clean up all spills immediately.</li> <li>Avoid contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> </ul>
Major Spills	Moderate hazard.  CAUTION: Advise personnel in area.  Alert Emergency Services and tell them location and nature of hazard.  Control personal contact by wearing protective clothing.

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

# **SECTION 7 Handling and storage**

Precautions for safe handling	
Safe handling	<ul> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Prevent concentration in hollows and sumps.</li> </ul>
Other information	<ul> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry area protected from environmental extremes.</li> <li>Store away from incompatible materials and foodstuff containers.</li> </ul>

#### Conditions for safe storage, including any incompatibilities

Suitable container	Multi-ply paper bag with sealed plastic liner or heavy gauge plastic bag.
	NOTE: Bags should be stacked, blocked, interlocked, and limited in height so that they are stable and secure against sliding or collapse. Check that all containers are clearly labelled and free from leaks. Packing as recommended by manufacturer.
Storage incompatibility	<ul> <li>Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.</li> <li>Avoid contact with copper, aluminium and their alloys.</li> </ul>

# SECTION 8 Exposure controls / personal protection

## **Control parameters**

Occupational Exposure Limits (OEL)

# INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	graded sand	Silica - Crystalline: Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	silica crystalline - quartz	Silica - Crystalline: Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	gypsum	Calcium sulphate	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	limestone	Calcium carbonate	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	titanium dioxide	Titanium dioxide	10 mg/m3	Not Available	Not Available	<ul> <li>(a) This value is for inhalable dust containing no asbestos and &lt; 1% crystalline silica.</li> </ul>

Emergency Limits				
Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
graded sand	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m3	33 mg/m3	200 mg/m3
silica crystalline - quartz	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m3	33 mg/m3	200 mg/m3
limestone	Carbonic acid, calcium salt	45 mg/m3	210 mg/m3	1,300 mg/m3
titanium dioxide	Titanium oxide; (Titanium dioxide)	30 mg/m3	330 mg/m3	2,000 mg/m3
Ingredient	Original IDLH		Revised IDLH	
graded sand	25 mg/m3 / 50 mg/m3		Not Available	
portland cement	5,000 mg/m3		Not Available	
silica crystalline - quartz	25 mg/m3 / 50 mg/m3		Not Available	
gypsum	Not Available		Not Available	
limestone	Not Available		Not Available	
titanium dioxide	5,000 mg/m3		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.
Personal protection	
Eye and face protection	<ul> <li>Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.</li> <li>Chemical goggles.whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.</li> <li>Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.</li> <li>Alternatively a gas mask may replace splash goggles and face shields.</li> </ul>
Skin protection	See Hand protection below
Skin protection Hands/feet protection	<ul> <li>See Hand protection below</li> <li>Elbow length PVC gloves</li> <li>NOTE:</li> <li>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.</li> <li>Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</li> <li>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.</li> <li>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.</li> <li>Personal hygiene is a key element of effective hand care.</li> <li>Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.</li> <li>Polychloroprene.</li> <li>Initile rubber.</li> <li>butyl rubber.</li> </ul>

Other protection
Other protection
Other protection
Other protection

Barrier cream.
 Skin cleansing cream.

#### **Respiratory protection**

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

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

\* - Negative pressure demand \*\* - Continuous flow

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

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

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

• Use approved positive flow mask if significant quantities of dust becomes airborne.

Try to avoid creating dust conditions.

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

#### Information on basic physical and chemical properties

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

## **SECTION 10 Stability and reactivity**

Reactivity	See section 7
Chemical stability	<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7

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Continued...

Hazardous decomposition products

**SECTION 11 Toxicological information** 

See section 5

# Information on toxicological effects

inormation on toxicological c		
Inhaled	The material can cause respiratory irritation in some persons. The body' Inhalation of dusts, generated by the material during the course of norma Inhalation may result in ulcers or sores of the lining of the nose (nasal m Persons with impaired respiratory function, airway diseases and condition if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if b conducted on individuals who may be exposed to further risk if handling in excessive exposures.	al handling, may be damaging to the health of the individual. ucosa), and lung damage. ons such as emphysema or chronic bronchitis, may incur further disability kidney damage has been sustained, proper screenings should be
	Effects on lungs are significantly enhanced in the presence of respirable	particles.
Ingestion	Accidental ingestion of the material may be damaging to the health of the	e individual.
Skin Contact	cancer are significantly related. Open cuts, abraded or irritated skin should not be exposed to this mater	ceration known as "chrome ulcers" may develop. Chrome ulcers and skin ial ions, may produce systemic injury with harmful effects. Examine the skin
Eye	If applied to the eyes, this material causes severe eye damage.	
	There is sufficient evidence to suggest that this material directly causes Long-term exposure to respiratory irritants may result in airways disease Strong evidence exists that this substance may cause irreversible mutat Skin contact with the material is more likely to cause a sensitisation read Substance accumulation, in the human body, may occur and may cause Animal testing shows long term exposure to aluminium oxides may caus smaller the size, the greater the tendencies of causing harm. Red blood cells and rabbit alveolar macrophages exposed to calcium sil in another. Both studies showed the substance to be more cytotoxic thar In a small cohort mortality study of workers in a wollastonite quarry, the of were lower than expected. Wollastonite is a calcium inosilicate mineral (	e, involving difficulty breathing and related whole-body problems. ions (though not lethal) even following a single exposure. tion in some persons compared to the general population. some concern following repeated or long-term occupational exposure. He lung disease and cancer, depending on the size of the particle. The icate insulation materials in vitro showed haemolysis in one study but not n titanium dioxide but less toxic than asbestos. bobserved number of deaths from all cancers combined and lung cancer CaSiO3).
Chronic	Cement contact dermatitis (CCD) may occur when contact shows an alle to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis. Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, di	n some cements and cement products. Soluble chromates readily s, eczematous rash, dystrophic nails, and dry skin; acute contact with s after they injure the lung epithelium. Chronic exposure to crystalline fficulty in breathing and impaired lung function. Chronic symptoms may posures in the workplace to high levels of fine-divided dusts may produce haled dusts in the lung, irrespective of the effect. This is particularly true ch) are present. he liver and pancreas. People with a genetic disposition to poor control um (III) irritates the airways, malnourishes the liver and kidneys, causes eases the risk of developing lung cancer.
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Dunlop Wide Joint Grout	Cement contact dermatitis (CCD) may occur when contact shows an aller to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis.         Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections.         Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any ind when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to t over iron are at an increased risk.         Chromium (III) is an essential trace mineral. Chronic exposure to chromifulid in the lungs, and adverse effects on white blood cells, and also increment or prelonged or repeated skin contact may cause drying with cracking, irritation of the standard scheme standard scheme contact may cause drying with cracking.         TOXICITY       0.3 mg/kg <sup>[2]</sup> 50 mg/kg <sup>[2]</sup> TOXICITY         Oral (rat) LD50: =500 mg/kg <sup>[2]</sup> TOXICITY	n some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     um (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION
Dunlop Wide Joint Grout graded sand	Cement contact dermatitis (CCD) may occur when contact shows an alle to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis. Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any inf when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to t over iron are at an increased risk. Chromium (III) is an essential trace mineral. Chronic exposure to chromi fluid in the lungs, and adverse effects on white blood cells, and also incr- Prolonged or repeated skin contact may cause drying with cracking, irrita <b>TOXICITY</b> Not Available <b>TOXICITY</b> 0.3 mg/kg <sup>[2]</sup> Oral (rat) LD50: =500 mg/kg <sup>[2]</sup>	n some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     um (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available
Dunlop Wide Joint Grout graded sand	Cement contact dermatitis (CCD) may occur when contact shows an aller to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis.         Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections.         Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any ind when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to t over iron are at an increased risk.         Chromium (III) is an essential trace mineral. Chronic exposure to chromifulid in the lungs, and adverse effects on white blood cells, and also increment or prelonged or repeated skin contact may cause drying with cracking, irritation of the standard scheme standard scheme contact may cause drying with cracking.         TOXICITY       0.3 mg/kg <sup>[2]</sup> 50 mg/kg <sup>[2]</sup> TOXICITY         Oral (rat) LD50: =500 mg/kg <sup>[2]</sup> TOXICITY	n some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     um (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION
Dunlop Wide Joint Grout graded sand portland cement	Cement contact dermatitis (CCD) may occur when contact shows an alle to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis. Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any int when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to t over iron are at an increased risk. Chromium (III) is an essential trace mineral. Chronic exposure to chromi fluid in the lungs, and adverse effects on white blood cells, and also incre- Prolonged or repeated skin contact may cause drying with cracking, irritz <b>TOXICITY</b> Not Available <b>TOXICITY</b> 0.3 mg/kg <sup>[2]</sup> <b>5</b> 0 mg/kg <sup>[2]</sup> <b>7</b> 0 Oral (rat) LD50: =500 mg/kg <sup>[2]</sup>	some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     uru (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION     Not Available
Dunlop Wide Joint Grout graded sand	Cement contact dermatitis (CCD) may occur when contact shows an alle to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis. Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any inf when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to over iron are at an increased risk. Chromium (III) is an essential trace mineral. Chronic exposure to chromi fluid in the lungs, and adverse effects on white blood cells, and also incr- Prolonged or repeated skin contact may cause drying with cracking, irrite <b>TOXICITY</b> 0.3 mg/kg <sup>[2]</sup> 50 mg/kg <sup>[2]</sup> Oral (rat) LD50: =500 mg/kg <sup>[2]</sup> <b>TOXICITY</b> Not Available	n some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     um (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION
Dunlop Wide Joint Grout graded sand portland cement	Cement contact dermatitis (CCD) may occur when contact shows an aller to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis.         Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections.         Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumocniosis, which is the lodgement of any ind when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to to over iron are at an increased risk.         Chromium (III) is an essential trace mineral. Chronic exposure to chromi fluid in the lungs, and adverse effects on white blood cells, and also incr         Prolonged or repeated skin contact may cause drying with cracking, irritation or repeated skin contact may cause drying with cracking, irritation in the lungs.         0.3 mg/kg <sup>[2]</sup> Oral (rat) LD50: =500 mg/kg <sup>[2]</sup> TOXICITY         Not Available         TOXICITY         Not Available	n some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     um (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION     Not Available     IRRITATION
Dunlop Wide Joint Grout graded sand portland cement	Cement contact dermatitis (CCD) may occur when contact shows an alle to soluble chromates (chromate compounds) present in trace amounts in penetrate intact skin. Cement dermatitis can be characterised by fissure highly alkaline mixtures may cause localised necrosis. Crystalline silicas activate the inflammatory response of white blood cells silicas reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, di include decreased vital lung capacity and chest infections. Repeated exp a condition known as pneumoconiosis, which is the lodgement of any int when a significant number of particles less than 0.5 microns (1/50000 in Chronic excessive intake of iron have been associated with damage to t over iron are at an increased risk. Chromium (III) is an essential trace mineral. Chronic exposure to chromi fluid in the lungs, and adverse effects on white blood cells, and also incre Prolonged or repeated skin contact may cause drying with cracking, irrite <b>TOXICITY</b> Not Available <b>TOXICITY</b> Not Available <b>TOXICITY</b> Not Available <b>TOXICITY</b> Not Available <b>TOXICITY</b> Not Available <b>TOXICITY</b> O.3 mg/kg <sup>[2]</sup> 50 mg/kg <sup>[2]</sup> Oral (rat) LD50: =500 mg/kg <sup>[2]</sup>	some cements and cement products. Soluble chromates readily     s, eczematous rash, dystrophic nails, and dry skin; acute contact with     s after they injure the lung epithelium. Chronic exposure to crystalline     fficulty in breathing and impaired lung function. Chronic symptoms may     posures in the workplace to high levels of fine-divided dusts may produce     haled dusts in the lung, irrespective of the effect. This is particularly true     ch) are present.     he liver and pancreas. People with a genetic disposition to poor control     uru (III) irritates the airways, malnourishes the liver and kidneys, causes     eases the risk of developing lung cancer.     ation and possible dermatitis following.      IRRITATION     Not Available      IRRITATION     Not Available      IRRITATION     Not Available      IRRITATION     Not Available      IRRITATION     Not Available
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	ΤΟΧΙΟΙΤΥ	IRRITATION	
1:	Oral (rat) LD50: 6450 mg/kg <sup>[2]</sup>	Eye: no adverse	e effect observed (not irritating) <sup>[1]</sup>
limestone		Skin (rabbit): 50	0 mg/24h-moderate
		Skin: no advers	e effect observed (not irritating) <sup>[1]</sup>
	ΤΟΧΙΟΙΤΥ	IRRITATION	
	0.0032 mg/kg <sup>[2]</sup>	Eye: no adverse	e effect observed (not irritating) <sup>[1]</sup>
	0.04 mg/kg <sup>[2]</sup>	Skin (human): 0	.3 mg /3D (int)-mild *
titanium dioxide	60000 mg/kg <sup>[2]</sup>	/kg <sup>[2]</sup> Skin: no adverse effect observed (not irritating) <sup>[1]</sup>	
	Oral (mouse) LD50: >10000 mg/kg <sup>[2]</sup>		
	Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>		
Legend:	1. Value obtained from Europe ECHA Registered Substances - specified data extracted from RTECS - Register of Toxic Effect of		ained from manufacturer's SDS. Unless otherwise
PORTLAND CEMENT	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important.		
SILICA CRYSTALLINE - QUARTZ	<ul> <li>WARNING: For inhalation exposure <u>ONLY</u>: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS</li> <li>The International Agency for Research on Cancer (IARC) has classified occupational exposures to respirable (&lt;5 um) crystalline silica as being carcinogenic to humans . This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.</li> <li>Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.</li> <li>* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).</li> <li>NOTE : the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.</li> </ul>		
	Gypsum (calcium sulfate dehydrate) irritates the skin, eye, mucous membranes, and airways. A series of studies involving Gypsum industry workers in Poland reported chronic, non-specific airways diseases. Repeat dose toxicity: Examination of workers at a gypsum manufacturing plant found restrictive defects on long-function tests in those who were chronically exposed to gypsum dust. Synergistic/antagonistic effects: Gypsum appears to be protective on quartz toxicity in animal testing.		
GYPSUM	workers in Poland reported chronic, non-specific airways diseas Repeat dose toxicity: Examination of workers at a gypsum manu chronically exposed to gypsum dust.	es. Ifacturing plant found restri	ctive defects on long-function tests in those who wer
GYPSUM	workers in Poland reported chronic, non-specific airways diseas Repeat dose toxicity: Examination of workers at a gypsum manu chronically exposed to gypsum dust.	es. Ifacturing plant found restri ve on quartz toxicity in anim ies. No evidence of mutage	ctive defects on long-function tests in those who wer nal testing. enic or teratogenic effects.
	workers in Poland reported chronic, non-specific airways diseas Repeat dose toxicity: Examination of workers at a gypsum manu chronically exposed to gypsum dust. Synergistic/antagonistic effects: Gypsum appears to be protectin Eye (rabbit) 0.75: mg/24h - No evidence of carcinogenic propert The material may produce severe irritation to the eye causing pr produce conjunctivitis. * IUCLID Laboratory (in vitro) and animal studies show, exposure to the m producing mutation. Exposure to titanium dioxide is via inhalation, swallowing or skir dysfunction of the lungs and immune system. Absorption by the outermost layer of the skin, suggesting that healthy skin may be cases have been reported in experimental animals. The material may produce moderate eye irritation leading to infli- conjunctivitis.	es. Ifacturing plant found restri re on quartz toxicity in anin ies. No evidence of mutage onounced inflammation. R material may result in a poss contact. When inhaled, it stomach and intestines de an effective barrier. There ammation. Repeated or pro-	ctive defects on long-function tests in those who were nal testing. enic or teratogenic effects. epeated or prolonged exposure to irritants may sible risk of irreversible effects, with the possibility of may deposit in lung tissue and lymph nodes causing pends on the size of the particle. It penetrated only the is no substantive data on genetic damage, though plonged exposure to irritants may produce
LIMESTONE	<ul> <li>workers in Poland reported chronic, non-specific airways diseas Repeat dose toxicity: Examination of workers at a gypsum many chronically exposed to gypsum dust.</li> <li>Synergistic/antagonistic effects: Gypsum appears to be protectin Eye (rabbit) 0.75: mg/24h - No evidence of carcinogenic propert The material may produce severe irritation to the eye causing pu produce conjunctivitis.</li> <li>* IUCLID Laboratory (in vitro) and animal studies show, exposure to the m producing mutation.</li> <li>Exposure to titanium dioxide is via inhalation, swallowing or skin dysfunction of the lungs and immune system. Absorption by the outermost layer of the skin, suggesting that healthy skin may be cases have been reported in experimental animals.</li> <li>The material may produce moderate eye irritation leading to infla</li> </ul>	es. Ifacturing plant found restri re on quartz toxicity in anin ies. No evidence of mutage onounced inflammation. R material may result in a poss contact. When inhaled, it stomach and intestines de an effective barrier. There ammation. Repeated or pro-	ctive defects on long-function tests in those who were nal testing. enic or teratogenic effects. epeated or prolonged exposure to irritants may sible risk of irreversible effects, with the possibility of may deposit in lung tissue and lymph nodes causing pends on the size of the particle. It penetrated only the is no substantive data on genetic damage, though plonged exposure to irritants may produce
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Data available to make classification

#### Toxicity

	Endpoint	Test Duration (hr)	Species	Value	Source
Dunlop Wide Joint Grout	Not Available	Not Available	Not Available	Not Available	Not Availabl
graded sand	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available Not Available	
	Endpoint	Test Duration (hr)	Species	Value	Source
portland cement	Not Available	Not Available	Not Available	Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Species	Value	Source
silica crystalline - quartz	Not Available	Not Available	Not Available	Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96	Fish	>1-970mg/L	2
gypsum	EC50	72	Algae or other aquatic plants	>79mg/L	2
	EC98	720	Algae or other aquatic plants	=1872.000mg/L	1
NOE	NOEC	24	Crustacea	Crustacea <2500.0mg/L	
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50	72	Algae or other aquatic plants	Algae or other aquatic plants >14mg/L	
limestone	EC10	72	Algae or other aquatic plants	Algae or other aquatic plants >14mg/L	
	NOEC	72	Algae or other aquatic plants	Algae or other aquatic plants 14mg/L	
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96	Fish	>1-mg/L	2
titanium dioxide	EC50	48	Crustacea	>1-mg/L	2
	EC50	72	Algae or other aquatic plants	>10-mg/L	2
	NOEC	504	Crustacea	<0.1mg/L	2

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

#### DO NOT discharge into sewer or waterways.

# Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
gypsum	HIGH	HIGH
titanium dioxide	HIGH	HIGH

## **Bioaccumulative potential**

Ingredient	Bioaccumulation	
gypsum	LOW (LogKOW = -2.2002)	
titanium dioxide	LOW (BCF = 10)	

## Mobility in soil

Ingredient	Mobility
gypsum	LOW (KOC = 6.124)
titanium dioxide	LOW (KOC = 23.74)

## **SECTION 13 Disposal considerations**

Waste treatment methods	
Product / Packaging disposal	<ul> <li>DO NOT allow wash water from cleaning or process equipment to enter drains.</li> <li>It may be necessary to collect all wash water for treatment before disposal.</li> <li>In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>Where in doubt contact the responsible authority.</li> <li>Recycle wherever possible or consult manufacturer for recycling options.</li> <li>Consult State Land Waste Management Authority for disposal.</li> <li>Bury residue in an authorised landfill.</li> <li>Recycle containers if possible, or dispose of in an authorised landfill.</li> </ul>

# **SECTION 14 Transport information**

Marine Pollutant	NO	
HAZCHEM	Not Applicable	
and transport (ADG): NOT RE	GULATED FOR TRANSPORT OF DANGEROU	S GOODS
ir transport (ICAO-IATA / DGR	): NOT REGULATED FOR TRANSPORT OF D	ANGEROUS GOODS
ea transport (IMDG-Code / GC	SVSee): NOT REGULATED FOR TRANSPORT	OF DANGEROUS GOODS
ransport in bulk according to ot Applicable	Annex II of MARPOL and the IBC code	
ECTION 15 Regulatory info	ormation	
afety, health and environment	tal regulations / legislation specific for the su	bstance or mixture
graded sand is found on the follo	owing regulatory lists	
- Australia Hazardous Chemical Infor Australian Inventory of Industrial Ch	mation System (HCIS) - Hazardous Chemicals	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
Chemical Footprint Project - Chemi		International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1 : Carcinogenic to humans
portland cement is found on the	following regulatory lists	
Australian Inventory of Industrial Ch	nemicals (AIIC)	
silica crystalline - quartz is found	I on the following regulatory lists	
	mation System (HCIS) - Hazardous Chemicals	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
Australian Inventory of Industrial Ch	nemicals (AIIC)	Monographs
Chemical Footprint Project - Chemi	cals of High Concern List	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1 : Carcinogenic to humans
gypsum is found on the following	g regulatory lists	
Australian Inventory of Industrial Ch	nemicals (AIIC)	
limestone is found on the followi	ng regulatory lists	
Australian Inventory of Industrial Ch	nemicals (AIIC)	
titanium dioxide is found on the	following regulatory lists	
Australian Inventory of Industrial Ch		International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
Chemical Footprint Project - Chemi		Monographs - Group 2B : Possibly carcinogenic to humans
International Agency for Research of Monographs	on Cancer (IARC) - Agents Classified by the IARC	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)
lational Inventory Status		
National Inventory	Status	
Australia - AIIC	Yes	
Australia Non-Industrial Use	No (graded sand; portland cement; silica crystalline	- quartz; gypsum; limestone; titanium dioxide)
Canada - DSL	Yes	· · · · · · · · · · · · · · · · · · ·
Canada - NDSL	No (graded sand; portland cement; silica crystalline - quartz; gypsum)	
China - IECSC	Yes	
Europe - EINEC / ELINCS / NLP	Yes	
Japan - ENCS	No (portland cement)	
Korea - KECI	Yes	
New Zealand - NZIoC	Yes	
Philippines - PICCS	No (portland cement)	
USA - TSCA	Yes	
Taiwan - TCSI	Yes	
Mexico - INSQ	Yes	
Vietnam - NCI	Yes	
Russia - ARIPS	Yes	
	Yes = All CAS declared ingredients are on the inven	ton
Legend:	No = One or more of the CAS listed ingredients are	

# **SECTION 16 Other information**

Revision Date	01/09/2020
Initial Date	01/09/2020

Version	Issue Date	Sections Updated
2.1.1.1	01/09/2020	Classification, Ingredients

#### Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

#### Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index

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