



8332-B Fast Set Epoxy (Part B) MG Chemicals UK Limited

Version No: A-2.00

Safety data sheet according to REACH Regulation (EC) No 1907/2006, as amended by UK REACH Regulations SI 2019/758

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L.REACH.GB.EN

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

1.1. Product Identifier

Product name	8332-B
Synonyms	SDS Code: 8332-Part B; 8332-25ML, 8332-50ML
Other means of identification	Fast Set Epoxy (Part B) UFI:H7H0-J036-400M-ENKM

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

Relevant identified uses	fast setting epoxy adhesive hardener
Uses advised against	Not Applicable

1.3. Details of the supplier of the safety data sheet

Registered company name	MG Chemicals UK Limited	MG Chemicals (Head office)
Address	Heame House, 23 Bilston Street, Sedgely Dudley DY3 1JA United Kingdom	9347 - 193 Street Surrey V4N 4E7 British Columbia Canada
Telephone	+(44) 1663 362888	+(1) 800-201-8822
Fax	Not Available	+(1) 800-708-9888
Website	Not Available	www.mgchemicals.com
Email	sales@mgchemicals.com	Info@mgchemicals.com

1.4. Emergency telephone number

Association / Organisation	Verisk 3E (Access code: 335388)
Emergency telephone numbers	+(44) 20 35147487
Other emergency telephone numbers	+(0) 800 680 0425

Supplier: Transfer Multisort Elektronik Ltd.
Coleshill, Birmingham Coleshill House Suite 1C, 1 Station Road
+44 1675790026 e-mail: office@tme-uk.eu

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classification according to regulation (EC) No 1272/2008 [CLP] and amendments [1]	H314 - Skin Corrosion/Irritation Category 1B, H317 - Skin Sensitizer Category 1B, H412 - Chronic Aquatic Hazard Category 3
Legend:	1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

2.2. Label elements

Hazard pictogram(s)	
Signal word	Danger

Hazard statement(s)

H314	Causes severe skin burns and eye damage.
H317	May cause an allergic skin reaction.
H412	Harmful to aquatic life with long lasting effects.

Supplementary statement(s)

Not Applicable

Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.
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P280	Wear protective gloves/protective clothing/eye protection/face protection/hearing protection.
P273	Avoid release to the environment.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or shower].
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P363	Wash contaminated clothing before reuse.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

P405	Store locked up.
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Precautionary statement(s) Disposal

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

Inhalation may produce health damage*.

Cumulative effects may result following exposure*.

Possible respiratory sensitizer*.

REACH - Art.57-59: The mixture does not contain Substances of Very High Concern (SVHC) at the SDS print date.

SECTION 3 Composition / information on ingredients

3.1. Substances

See 'Composition on ingredients' in Section 3.2

3.2. Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classification according to regulation (EC) No 1272/2008 [CLP] and amendments	Nanoform Particle Characteristics
1.72244-98-5 2.Not Available 3.Not Available 4.Not Available	84	<u>trimercaptan ether, propoxylated</u>	Chronic Aquatic Hazard Category 3, Skin Sensitizer Category 1; H412, H317 [1]	Not Available
1.90-72-2 2.202-013-9 3.603-069-00-0 4.Not Available	16	<u>2,4,6-tris[(dimethylamino)methyl]phenol</u>	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Eye Irritation Category 2; H302, H315, H319 [2]	Not Available
Legend:	1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 3. Classification drawn from C&L; * EU IOELVs available; [e] Substance identified as having endocrine disrupting properties			

SECTION 4 First aid measures

4.1. Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Immediately hold eyelids apart and flush the eye continuously with running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▶ Transport to hospital or doctor without delay. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. <p>For amines:</p> <ul style="list-style-type: none"> ▶ If liquid amines come in contact with the eyes, irrigate immediately and continuously with low pressure flowing water, preferably from an eye wash fountain, for 15 to 30 minutes. ▶ For more effective flushing of the eyes, use the fingers to spread apart and hold open the eyelids. The eyes should then be "rolled" or moved in all directions. ▶ Seek immediate medical attention, preferably from an ophthalmologist.
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately flush body and clothes with large amounts of water, using safety shower if available. ▶ Quickly remove all contaminated clothing, including footwear. ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.

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	<ul style="list-style-type: none"> ▶ Transport to hospital, or doctor. <p>For amines:</p> <ul style="list-style-type: none"> ▶ In case of major exposure to liquid amine, promptly remove any contaminated clothing, including rings, watches, and shoe, preferably under a safety shower. ▶ Wash skin for 15 to 30 minutes with plenty of water and soap. Call a physician immediately. ▶ Remove and dry-clean or launder clothing soaked or soiled with this material before reuse. Dry cleaning of contaminated clothing may be more effective than normal laundering. ▶ Inform individuals responsible for cleaning of potential hazards associated with handling contaminated clothing. ▶ Discard contaminated leather articles such as shoes, belts, and watchbands. ▶ Note to Physician: Treat any skin burns as thermal burns. After decontamination, consider the use of cold packs and topical antibiotics.
Inhalation	<ul style="list-style-type: none"> ▶ If fumes or combustion products are inhaled remove from contaminated area. ▶ Lay patient down. Keep warm and rested. ▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▶ Transport to hospital, or doctor, without delay. ▶ Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. ▶ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). ▶ As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. ▶ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. <p>This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)</p> <p>For amines:</p> <ul style="list-style-type: none"> ▶ All employees working in areas where contact with amine catalysts is possible should be thoroughly trained in the administration of appropriate first aid procedures. ▶ Experience has demonstrated that prompt administration of such aid can minimize the effects of accidental exposure. ▶ Promptly move the affected person away from the contaminated area to an area of fresh air. ▶ Keep the affected person calm and warm, but not hot. ▶ If breathing is difficult, oxygen may be administered by a qualified person. ▶ If breathing stops, give artificial respiration. Call a physician at once.
Ingestion	<ul style="list-style-type: none"> ▶ For advice, contact a Poisons Information Centre or a doctor at once. ▶ Urgent hospital treatment is likely to be needed. ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Transport to hospital or doctor without delay. <p>For amines:</p> <ul style="list-style-type: none"> ▶ If liquid amine are ingested, have the affected person drink several glasses of water or milk. ▶ Do not induce vomiting. ▶ Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.

4.2 Most important symptoms and effects, both acute and delayed

See Section 11

4.3. Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

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

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

Alkalis continue to cause damage after exposure.

INGESTION:

- ▶ Milk and water are the preferred diluents

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

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

* Catharsis and emesis are absolutely contra-indicated.

* Activated charcoal does not absorb alkali.

* Gastric lavage should not be used.

Supportive care involves the following:

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

SKIN AND EYE:

- ▶ Injury should be irrigated for 20-30 minutes.

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

For amines:

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

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

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

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

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

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such agents are used, handled, or manufactured.

Medical surveillance programs should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation. Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling.

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

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

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

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

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

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

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

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

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

Alliance for Polyurethanes Industry

SECTION 5 Firefighting measures

5.1. Extinguishing media

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

5.2. 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
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5.3. Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▶ 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 fire fighting procedures suitable for surrounding area. ▶ 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. ▶ Equipment should be thoroughly decontaminated after use. <p>For amines:</p> <ul style="list-style-type: none"> ▶ For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode. ▶ Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions. ▶ Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ 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. <p>Combustion products include: carbon dioxide (CO₂) nitrogen oxides (NO_x) sulfur oxides (SO_x) other pyrolysis products typical of burning organic material. May emit corrosive fumes.</p>

SECTION 6 Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

See section 8

6.2. Environmental precautions

See section 12

6.3. Methods and material for containment and cleaning up

Minor Spills	<ul style="list-style-type: none"> ▶ Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. ▶ Check regularly for spills and leaks. ▶ 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.
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- ▶ Wipe up.
 - ▶ Place in a suitable, labelled container for waste disposal.
- for amines:
- ▶ If possible (i.e., without risk of contact or exposure), stop the leak.
 - ▶ Contain the spilled material by diking, then neutralize.
 - ▶ Next, absorb the neutralized product with clay, sawdust, vermiculite, or other inert absorbent and shovel into containers.
 - ▶ Store the containers outdoors.
 - ▶ Brooms and mops should be disposed of, along with any remaining absorbent, in accordance with all applicable federal, state, and local regulations and requirements.
 - ▶ Decontamination of floors and other hard surfaces after the spilled material has been removed may be accomplished by using a 5% solution of acetic acid, followed by very hot water
 - ▶ Dispose of the material in full accordance with all federal, state, and local laws and regulations governing the disposal of chemical wastes.
 - ▶ Waste materials from an amine catalyst spill or leak may be "hazardous wastes" that are regulated under various laws.

Chemical Class: amines, alkyl
 For release onto land: recommended sorbents listed in order of priority.

SORBENT TYPE	RANK	APPLICATION	COLLECTION	LIMITATIONS
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LAND SPILL - SMALL

cross-linked polymer - particulate	1	shovel	shovel	R, W, SS
cross-linked polymer - pillow	1	throw	pitchfork	R,DGC, RT
sorbent clay - particulate	2	shovel	shovel	R, I, P
wood fiber - pillow	3	throw	pitchfork	R, P, DGC, RT,
treated wood fibre - pillow	3	throw	pitchfork	DGC, RT
foamed glass - pillow	4	throw	pitchfork	R, P, DGC, RT

LAND SPILL - MEDIUM

cross-linked polymer -particulate	1	blower	skidloader	R, W, SS
cross-linked polymer - pillow	2	throw	skidloader	R, DGC, RT
sorbent clay - particulate	3	blower	skidloader	R, I, P
polypropylene - particulate	3	blower	skidloader	W, SS, DGC
expanded mineral - particulate	4	blower	skidloader	R, I, W, P, DGC
polypropylene - mat	4	throw	skidloader	DGC, RT

Legend

DGC: Not effective where ground cover is dense
 R: Not reusable
 I: Not incinerable
 P: Effectiveness reduced when rainy
 RT:Not effective where terrain is rugged
 SS: Not for use within environmentally sensitive sites
 W: Effectiveness reduced when windy
 Reference: Sorbents for Liquid Hazardous Substance Cleanup and Control;
 R.W Melvold et al: Pollution Technology Review No. 150: Noyes Data Corporation 1988

NOTE:

- ▶ Organic absorbents have been known to ignite when contaminated with amines in closed containers. Certain cellulosic materials used for spill cleanup such as wood chips or sawdust have shown reactivity with ethyleneamines and should be avoided.
- ▶ Clear area of personnel and move upwind.
- ▶ 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.
- ▶ Consider evacuation (or protect in place).
- ▶ Stop leak if safe to do so.
- ▶ Contain spill with sand, earth or vermiculite.
- ▶ Collect recoverable product into labelled containers for recycling.
- ▶ Neutralise/decontaminate residue (see Section 13 for specific agent).
- ▶ Collect solid residues and seal in labelled drums for disposal.
- ▶ Wash area and prevent runoff into drains.
- ▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- ▶ If contamination of drains or waterways occurs, advise emergency services.

For amines:

- ▶ First remove all ignition sources from the spill area.
- ▶ Have firefighting equipment nearby, and have firefighting personnel fully trained in the proper use of the equipment and in the procedures used in fighting a chemical fire.
- ▶ Spills and leaks of polyurethane amine catalysts should be contained by diking, if necessary, and cleaned up only by properly trained and equipped personnel. All others should promptly leave the contaminated area and stay upwind.
- ▶ Protective equipment for cleanup crews should include appropriate respiratory protective devices and impervious clothing, footwear, and gloves.
- ▶ All work areas should be equipped with safety showers and eyewash fountains in good working order.
- ▶ Any material spilled or splashed onto the skin should be quickly washed off.
- ▶ Spills or releases may need to be reported to federal, state, and local authorities. This reporting contingency should be a part of a site's emergency response plan.
- ▶ Protective equipment should be used during emergency situations whenever there is a likelihood of exposure to liquid amines or to excessive concentrations of amine vapor. "Emergency" may be defined as any occurrence, such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment that results in an uncontrolled release of amine liquid or vapor.
- ▶ Emergency protective equipment should include:
 - ▶ • Self-contained breathing apparatus, with full face-piece, operated in positive pressure or pressure-demand mode.

Major Spills

Continued...

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- ▶ • Rubber gloves
- ▶ • Long-sleeve coveralls or impervious full body suit
- ▶ • Head protection, such as a hood, made of material(s) providing protection against amine catalysts
- ▶ Firefighting personnel and other on-site Emergency Responders should be fully trained in Chemical Emergency Procedures. However back-up from local authorities should be sought

6.4. Reference to other sections

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

SECTION 7 Handling and storage

7.1. Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material. ▶ 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. Launder contaminated clothing before re-use. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained. ▶ DO NOT allow clothing wet with material to stay in contact with skin
Fire and explosion protection	See section 5
Other information	<ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ DO NOT store near acids, or oxidising agents ▶ No smoking, naked lights, heat or ignition sources.

7.2. Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Lined metal can, lined metal pail/ can. ▶ Plastic pail. ▶ Polyliner drum. ▶ Packing as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks. <p>For low viscosity materials</p> <ul style="list-style-type: none"> ▶ Drums and jerricans must be of the non-removable head type. ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure. <p>For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):</p> <ul style="list-style-type: none"> ▶ Removable head packaging; ▶ Cans with friction closures and ▶ low pressure tubes and cartridges <p>may be used.</p> <p>-</p> <p>Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.</p>
Storage incompatibility	<ul style="list-style-type: none"> ▶ Avoid contact with copper, aluminium and their alloys. ▶ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. ▶ Avoid reaction with oxidising agents

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment
2,4,6-tris(dimethylamino)methylphenol	Not Available	0.084 mg/L (Water (Fresh)) 0.008 mg/L (Water - Intermittent release) 0.84 mg/L (Water (Marine)) 0.2 mg/L (STP)

* Values for General Population

Occupational Exposure Limits (OEL)

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INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available

Not Applicable

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
2,4,6-tris[(dimethylamino)methyl]phenol	6.5 mg/m ³	72 mg/m ³	430 mg/m ³

Ingredient	Original IDLH	Revised IDLH
trimercaptan ether, propoxylated	Not Available	Not Available
2,4,6-tris[(dimethylamino)methyl]phenol	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
trimercaptan ether, propoxylated	D	> 0.1 to ≤ 1 ppm
2,4,6-tris[(dimethylamino)methyl]phenol	C	> 1 to ≤ 10 parts per million (ppm)

Notes:

Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

MATERIAL DATA

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- ▶ cause inflammation
- ▶ cause increased susceptibility to other irritants and infectious agents
- ▶ lead to permanent injury or dysfunction
- ▶ permit greater absorption of hazardous substances and
- ▶ acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

8.2. Exposure controls

8.2.1. 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.

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.

An approved self contained breathing apparatus (SCBA) may be required in some situations.

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


Type of Contaminant:	Air Speed:
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.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases

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	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.
8.2.2. Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ 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. ▶ Chemical goggles whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted. ▶ Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection. ▶ Alternatively a gas mask may replace splash goggles and face shields. ▶ 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] <p>For amines: SPECIAL PRECAUTION:</p> <ul style="list-style-type: none"> ▶ Because amines are alkaline materials that can cause rapid and severe tissue damage, wearing of contact lenses while working with amines is strongly discouraged. Wearing such lenses can prolong contact of the eye tissue with the amine, thereby causing more severe damage. ▶ Appropriate eye protection should be worn whenever amines are handled or whenever there is any possibility of direct contact with liquid products, vapors, or aerosol mists. <p>CAUTION:</p> <ul style="list-style-type: none"> ▶ Ordinary safety glasses or face-shields will not prevent eye irritation from high concentrations of vapour. ▶ In operations where positive-pressure, air-supplied breathing apparatus is not required, all persons handling liquid amine catalysts or other polyurethane components in open containers should wear chemical workers safety goggles. ▶ Eyewash fountains should be installed, and kept in good working order, wherever amines are used.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Elbow length PVC gloves ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots. <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>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</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 · 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>As defined in ASTM F-739-96 in any application, gloves are rated as:</p> <ul style="list-style-type: none"> · Excellent when breakthrough time > 480 min · Good when breakthrough time > 20 min · Fair when breakthrough time < 20 min · Poor when glove material degrades <p>For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.</p> <p>It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.</p> <p>Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers' technical data should always be taken into account to ensure selection of the most appropriate glove for the task.</p> <p>Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:</p> <ul style="list-style-type: none"> · Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential <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> <ul style="list-style-type: none"> ▶ Neoprene gloves

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	For amines: <ul style="list-style-type: none"> ▶ 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 ▶ Where there is a possibility of exposure to liquid amines skin protection should include: rubber gloves, (neoprene, nitrile, or butyl). ▶ DO NOT USE latex.
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ PVC Apron. ▶ PVC protective suit may be required if exposure severe. ▶ Eyewash unit. ▶ Ensure there is ready access to a safety shower.

Respiratory protection

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

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AK-AUS / Class1 P2	-
up to 50	1000	-	AK-AUS / Class 1 P2
up to 50	5000	Airline *	-
up to 100	5000	-	AK-2 P2
up to 100	10000	-	AK-3 P2
100+			Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand

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)

- ▶ Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- ▶ The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- ▶ Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

Where engineering controls are not feasible and work practices do not reduce airborne amine concentrations below recommended exposure limits, appropriate respiratory protection should be used. In such cases, air-purifying respirators equipped with cartridges designed to protect against amines are recommended.

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties**9.1. Information on basic physical and chemical properties**

Appearance	Yellow		
Physical state	Liquid	Relative density (Water= 1)	1.13
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	>1000.00
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Available
Flash point (°C)	>93.3	Taste	Not Available
Evaporation rate	Not Available BuAC = 1	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available
Nanoform Solubility	Not Available	Nanoform Particle Characteristics	Not Available
Particle Size	Not Available		

9.2. Other information

Continued...

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Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2
10.2. Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
10.3. Possibility of hazardous reactions	See section 7.2
10.4. Conditions to avoid	See section 7.2
10.5. Incompatible materials	See section 7.2
10.6. Hazardous decomposition products	See section 5.3

SECTION 11 Toxicological information

11.1. Information on toxicological effects

Inhaled	<p>Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.</p> <p>Inhalation of alkaline corrosives may produce irritation of the respiratory tract with coughing, choking, pain and mucous membrane damage. Pulmonary oedema may develop in more severe cases; this may be immediate or in most cases following a latent period of 5-72 hours. Symptoms may include a tightness in the chest, dyspnoea, frothy sputum, cyanosis and dizziness. Findings may include hypotension, a weak and rapid pulse and moist rales.</p> <p>Inhalation of amine vapours may cause irritation of the mucous membranes of the nose and throat and lung irritation with respiratory distress and cough. Single exposures to near lethal concentrations and repeated exposures to sublethal concentrations produces tracheitis, bronchitis, pneumonitis and pulmonary oedema. Aliphatic and alicyclic amines are generally well absorbed from the respiratory tract. Systemic effects include headache, nausea, faintness and anxiety. These effects are thought to be transient and are probably related to the pharmacodynamic action of the amines. Histamine release by aliphatic amines may produce bronchoconstriction and wheezing. Inhalation hazard is increased at higher temperatures.</p>
Ingestion	<p>Ingestion of alkaline corrosives may produce immediate pain, and circumoral burns. Mucous membrane corrosive damage is characterised by a white appearance and soapy feel; this may then become brown, oedematous and ulcerated. Profuse salivation with an inability to swallow or speak may also result. Even where there is limited or no evidence of chemical burns, both the oesophagus and stomach may experience a burning pain; vomiting and diarrhoea may follow. The vomitus may be thick and may be slimy (mucous) and may eventually contain blood and shreds of mucosa. Epiglottal oedema may result in respiratory distress and asphyxia. Marked hypotension is symptomatic of shock; a weak and rapid pulse, shallow respiration and clammy skin may also be evident. Circulatory collapse may occur and, if uncorrected, may produce renal failure. Severe exposures may result in oesophageal or gastric perforation accompanied by mediastinitis, substernal pain, peritonitis, abdominal rigidity and fever. Although oesophageal, gastric or pyloric stricture may be evident initially, these may occur after weeks or even months and years. Death may be quick and results from asphyxia, circulatory collapse or aspiration of even minute amounts. Death may also be delayed as a result of perforation, pneumonia or the effects of stricture formation.</p> <p>Accidental ingestion of the material may be damaging to the health of the individual.</p> <p>Aliphatic and alicyclic amines are generally well absorbed from the gut. Corrosive action may cause tissue damage throughout the gastrointestinal tract. Detoxification is thought to occur in the liver, kidney and intestinal mucosa with the enzymes, monoamine oxidase and diamine oxidase (histaminase) having a significant role.</p> <p>High molecular weight material; on single acute exposure would be expected to pass through gastrointestinal tract with little change / absorption. Occasionally accumulation of the solid material within the alimentary tract may result in formation of a bezoar (concretion), producing discomfort.</p>
Skin Contact	<p>The material can produce severe chemical burns following direct contact with the skin.</p> <p>Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.</p> <p>Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep.</p> <p>Volatile amine vapours produce primary skin irritation and dermatitis. Direct local contact, with the lower molecular weight liquids, may produce skin burns. Percutaneous absorption of simple aliphatic amines is known to produce lethal effects often the same as that for oral administration. Cutaneous sensitisation has been recorded chiefly due to ethyleneamines. Histamine release following exposure to many aliphatic amines may result in 'triple response' (white vasoconstriction, red flare and wheal) in human skin.</p> <p>Toxic effects may result from skin absorption</p> <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>
Eye	<p>Direct contact with alkaline corrosives may produce pain and burns. Oedema, destruction of the epithelium, corneal opacification and iritis may occur. In less severe cases these symptoms tend to resolve. In severe injuries the full extent of the damage may not be immediately apparent with late complications comprising a persistent oedema, vascularisation and corneal scarring, permanent opacity, staphyloma, cataract, symblepharon and loss of sight.</p> <p>Vapours of volatile amines cause eye irritation with lachrymation, conjunctivitis and minor transient corneal oedema which results in 'halos' around lights (glauropsia, 'blue haze', or 'blue-grey haze'). Vision may become misty and halos may appear several hours after workers are exposed to the substance</p> <p>This effect generally disappears spontaneously within a few hours of the end of exposure, and does not produce physiological after-effects. However oedema of the corneal epithelium, which is primarily responsible for vision disturbances, may take more than one or more days to clear, depending on the severity of exposure. Photophobia and discomfort from the roughness of the corneal surface also may occur after greater exposures.</p>

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	<p>Although no detriment to the eye occurs as such, glaucopsia predisposes an affected individual to physical accidents and reduces the ability to undertake skilled tasks such as driving a vehicle.</p> <p>Direct local contact with the liquid may produce eye damage which may be permanent in the case of the lower molecular weight species.</p>
Chronic	<p>Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.</p> <p>Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.</p> <p>Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitizers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitizer will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.</p> <p>Substances that can cause occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitizers. Wherever it is reasonably practicable, exposure to substances that can cause occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive.</p> <p>Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance.</p> <p>Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.</p>

11.2.1. Endocrine Disruption Properties

Not Available

8332-B Fast Set Epoxy (Part B)	TOXICITY	IRRITATION
	Not Available	Not Available
trimercaptan ether, propoxylated	TOXICITY	IRRITATION
	<p>Dermal (rabbit) LD50: >10200 mg/kg^[2]</p> <p>Oral(Rat) LD50; 2600 mg/kg^[2]</p>	Not Available
2,4,6-tris[(dimethylamino)methyl]phenol	TOXICITY	IRRITATION
	dermal (rat) LD50: >973 mg/kg ^[1]	Eye (rabbit): 0.05 mg/24h - SEVERE
	Oral(Rat) LD50; 2169 mg/kg ^[1]	Eye: adverse effect observed (irreversible damage) ^[1]
		Skin (rabbit): 2 mg/24h - SEVERE
		Skin: adverse effect observed (corrosive) ^[1]
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

TRIMERCAPTAN ETHER, PROPOXYLATED	<p>Polyethers, for example, ethoxylated surfactants and polyethylene glycols, are highly susceptible towards air oxidation as the ether oxygens will stabilize intermediary radicals involved. Investigations of a chemically well-defined alcohol (pentaethylene glycol mono-n-dodecyl ether) ethoxylate, showed that polyethers form complex mixtures of oxidation products when exposed to air. Sensitization studies in guinea pigs revealed that the pure nonoxidized surfactant itself is nonsensitizing but that many of the investigated oxidation products are sensitizers. Two hydroperoxides were identified in the oxidation mixture, but only one (16-hydroperoxy-3,6,9,12,15-pentaoxaheptacosan-1-ol) was stable enough to be isolated. It was found to be a strong sensitizer in LLNA (local lymph node assay for detection of sensitization capacity). The formation of other hydroperoxides was indicated by the detection of their corresponding aldehydes in the oxidation mixture .</p> <p>On the basis of the lower irritancy, nonionic surfactants are often preferred to ionic surfactants in topical products. However, their susceptibility towards autoxidation also increases the irritation. Because of their irritating effect, it is difficult to diagnose ACD to these compounds by patch testing.</p> <p>Allergic Contact Dermatitis—Formation, Structural Requirements, and Reactivity of Skin Sensitizers. Ann-Therese Karlberg et al; Chem. Res. Toxicol.2008,21,53-69</p> <p>Polyethylene glycols (PEGs) have a wide variety of PEG-derived mixtures due to their readily linkable terminal primary hydroxyl groups in combination with many possible compounds and complexes such as ethers, fatty acids, castor oils, amines, propylene glycols, among other derivatives. PEGs and their derivatives are broadly utilized in cosmetic products as surfactants, emulsifiers, cleansing agents, humectants, and skin conditioners.</p> <p>PEGs and PEG derivatives were generally regulated as safe for use in cosmetics, with the conditions that impurities and by-products, such as ethylene oxides and 1,4-dioxane, which are known carcinogenic materials, should be removed before they are mixed in cosmetic formulations.</p> <p>Most PEGs are commonly available commercially as mixtures of different oligomer sizes in broadly- or narrowly-defined molecular weight (MW) ranges. For instance, PEG-10,000 typically designates a mixture of PEG molecules (n = 195 to 265) having an average MW of 10,000. PEG is also known as polyethylene oxide (PEO) or polyoxyethylene (POE), with the three names being chemical synonyms. However, PEGs mainly refer to oligomers and polymers with molecular masses below 20,000 g/mol, while PEOs are polymers with molecular masses above 20,000 g/mol, and POEs are polymers of any molecular mass. Relatively small molecular weight PEGs are produced by the chemical reaction between ethylene oxide and water or ethylene glycol (or other ethylene glycol oligomers), as catalyzed by acidic or basic catalysts. To produce PEO or high-molecular weight PEGs, synthesis is performed by suspension polymerization. It is necessary to hold the growing polymer chain in solution during the course of the poly-condensation process. The reaction is catalyzed by magnesium-, aluminum-, or calcium-organoelement compounds. To prevent coagulation of polymer chains in the solution, chelating additives such as dimethylglyoxime are used</p> <p>Safety Evaluation of Polyethylene Glycol (PEG) Compounds for Cosmetic Use: Toxicol Res 2015; 31:105-136 The Korean Society of Toxicology</p>
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	<p>http://doi.org/10.5487/TR.2015.31.2.105</p>
<p>2,4,6- TRIS[(DIMETHYLAMINO)METHYL]PHENOL</p>	<p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>The material may produce severe 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) thickening of the epidermis.</p> <p>Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.</p> <p>Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.</p>
<p>8332-B Fast Set Epoxy (Part B) & 2,4,6- TRIS[(DIMETHYLAMINO)METHYL]PHENOL</p>	<p>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.</p> <p>While it is difficult to generalise about the full range of potential health effects posed by exposure to the many different amine compounds, characterised by those used in the manufacture of polyurethane and polyisocyanurate foams, it is agreed that overexposure to the majority of these materials may cause adverse health effects.</p> <ul style="list-style-type: none"> ▶ Many amine-based compounds can induce histamine liberation, which, in turn, can trigger allergic and other physiological effects, including bronchoconstriction or bronchial asthma and rhinitis. ▶ Systemic symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, tachycardia (rapid heartbeat), itching, erythema (reddening of the skin), urticaria (hives), and facial edema (swelling). Systemic effects (those affecting the body) that are related to the pharmacological action of amines are usually transient. <p>Typically, there are four routes of possible or potential exposure: inhalation, skin contact, eye contact, and ingestion.</p> <p>Inhalation:</p> <p>Inhalation of vapors may, depending upon the physical and chemical properties of the specific product and the degree and length of exposure, result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs.</p> <p>Products with higher vapour pressures have a greater potential for higher airborne concentrations. This increases the probability of worker exposure.</p> <p>Higher concentrations of certain amines can produce severe respiratory irritation, characterised by nasal discharge, coughing, difficulty in breathing, and chest pains.</p> <p>Chronic exposure via inhalation may cause headache, nausea, vomiting, drowsiness, sore throat, bronchopneumonia, and possible lung damage. Also, repeated and/or prolonged exposure to some amines may result in liver disorders, jaundice, and liver enlargement. Some amines have been shown to cause kidney, blood, and central nervous system disorders in laboratory animal studies.</p> <p>While most polyurethane amine catalysts are not sensitizers, some certain individuals may also become sensitized to amines and may experience respiratory distress, including asthma-like attacks, whenever they are subsequently exposed to even very small amounts of vapor. Once sensitized, these individuals must avoid any further exposure to amines. Although chronic or repeated inhalation of vapor concentrations below hazardous or recommended exposure limits should not ordinarily affect healthy individuals, chronic overexposure may lead to permanent pulmonary injury, including a reduction in lung function, breathlessness, chronic bronchitis, and immunologic lung disease.</p> <p>Inhalation hazards are increased when exposure to amine catalysts occurs in situations that produce aerosols, mists, or heated vapors. Such situations include leaks in fitting or transfer lines. Medical conditions generally aggravated by inhalation exposure include asthma, bronchitis, and emphysema.</p> <p>Skin Contact:</p> <p>Skin contact with amine catalysts poses a number of concerns. Direct skin contact can cause moderate to severe irritation and injury-i.e., from simple redness and swelling to painful blistering, ulceration, and chemical burns. Repeated or prolonged exposure may also result in severe cumulative dermatitis.</p> <p>Skin contact with some amines may result in allergic sensitization. Sensitized persons should avoid all contact with amine catalysts. Systemic effects resulting from the absorption of the amines through skin exposure may include headaches, nausea, faintness, anxiety, decrease in blood pressure, reddening of the skin, hives, and facial swelling. These symptoms may be related to the pharmacological action of the amines, and they are usually transient.</p> <p>Eye Contact:</p> <p>Amine catalysts are alkaline in nature and their vapours are irritating to the eyes, even at low concentrations.</p> <p>Direct contact with the liquid amine may cause severe irritation and tissue injury, and the "burning" may lead to blindness. (Contact with solid products may result in mechanical irritation, pain, and corneal injury.)</p> <p>Exposed persons may experience excessive tearing, burning, conjunctivitis, and corneal swelling.</p> <p>The corneal swelling may manifest itself in visual disturbances such as blurred or "foggy" vision with a blue tint ("blue haze") and sometimes a halo phenomenon around lights. These symptoms are transient and usually disappear when exposure ceases.</p> <p>Some individuals may experience this effect even when exposed to concentrations below doses that ordinarily cause respiratory irritation.</p> <p>Ingestion:</p> <p>The oral toxicity of amine catalysts varies from moderately to very toxic.</p> <p>Some amines can cause severe irritation, ulceration, or burns of the mouth, throat, esophagus, and gastrointestinal tract.</p> <p>Material aspirated (due to vomiting) can damage the bronchial tubes and the lungs.</p> <p>Affected persons also may experience pain in the chest or abdomen, nausea, bleeding of the throat and the gastrointestinal tract, diarrhea, dizziness, drowsiness, thirst, circulatory collapse, coma, and even death.</p> <p>Polyurethane Amine Catalysts: Guidelines for Safe Handling and Disposal; Technical Bulletin June 2000 Alliance for Polyurethanes Industry</p>
<p>8332-B Fast Set Epoxy (Part B) & TRIMERCAPTAN ETHER, PROPOXYLATED</p>	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>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 sensitization potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitizing substance which is widely distributed can be a more important allergen than one with stronger sensitizing 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.</p>
<p>TRIMERCAPTAN ETHER, PROPOXYLATED & 2,4,6- TRIS[(DIMETHYLAMINO)METHYL]PHENOL</p>	<p>No significant acute toxicological data identified in literature search.</p>

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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 either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 Ecological information

12.1. Toxicity

8332-B Fast Set Epoxy (Part B)	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

trimercaptan ether, propoxylated	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

2,4,6-tris[(dimethylamino)methyl]phenol	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	72h	Algae or other aquatic plants	2.8mg/l	2
	EC50	72h	Algae or other aquatic plants	2.8mg/l	2
	LC50	96h	Fish	175mg/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*

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

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

DO NOT discharge into sewer or waterways.

12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
2,4,6-tris[(dimethylamino)methyl]phenol	HIGH	HIGH

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation
2,4,6-tris[(dimethylamino)methyl]phenol	LOW (LogKOW = 0.773)

12.4. Mobility in soil

Ingredient	Mobility
2,4,6-tris[(dimethylamino)methyl]phenol	LOW (KOC = 15130)

12.5. Results of PBT and vPvB assessment

	P	B	T
Relevant available data	Not Applicable	Not Applicable	Not Applicable
PBT Criteria fulfilled?	Not Applicable	Not Applicable	Not Applicable

12.6. Endocrine Disruption Properties

Not Available

12.7. Other adverse effects

Not Available

SECTION 13 Disposal considerations

13.1. 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.


Continued...

8332-B Fast Set Epoxy (Part B)

	<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 SDS and observe all notices pertaining to the product. <p>Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> ▶ Reduction ▶ Reuse ▶ Recycling ▶ Disposal (if all else fails) <p>This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.</p> <ul style="list-style-type: none"> ▶ 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. ▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. ▶ Treat and neutralise at an approved treatment plant. ▶ Treatment should involve: Neutralisation with suitable dilute acid followed by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material). ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
Waste treatment options	Not Available
Sewage disposal options	Not Available

SECTION 14 Transport information

Labels Required

		<p>Excepted Quantity Code E2 for all modes of transport. On air waybill, write "Dangerous Goods in Excepted Quantity"</p>
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Land transport (ADR-RID)

14.1. UN number	2735				
14.2. UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. (contains 2,4,6-tris[(dimethylamino)methyl]phenol)				
14.3. Transport hazard class(es)	<table border="1" style="width: 100%;"> <tr> <td>Class</td> <td>8</td> </tr> <tr> <td>Subrisk</td> <td>Not Applicable</td> </tr> </table>	Class	8	Subrisk	Not Applicable
Class	8				
Subrisk	Not Applicable				
14.4. Packing group	II				
14.5. Environmental hazard	Not Applicable				
14.6. Special precautions for user	<table border="1" style="width: 100%;"> <tr> <td>Special provisions</td> <td>274</td> </tr> <tr> <td>Limited quantity</td> <td>1 L</td> </tr> </table>	Special provisions	274	Limited quantity	1 L
Special provisions	274				
Limited quantity	1 L				

Air transport (ICAO-IATA / DGR)

14.1. UN number	2735														
14.2. UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. (contains 2,4,6-tris[(dimethylamino)methyl]phenol)														
14.3. Transport hazard class(es)	<table border="1" style="width: 100%;"> <tr> <td>ICAO/IATA Class</td> <td>8</td> </tr> <tr> <td>ICAO / IATA Subrisk</td> <td>Not Applicable</td> </tr> <tr> <td>ERG Code</td> <td>8L</td> </tr> </table>	ICAO/IATA Class	8	ICAO / IATA Subrisk	Not Applicable	ERG Code	8L								
ICAO/IATA Class	8														
ICAO / IATA Subrisk	Not Applicable														
ERG Code	8L														
14.4. Packing group	II														
14.5. Environmental hazard	Not Applicable														
14.6. Special precautions for user	<table border="1" style="width: 100%;"> <tr> <td>Special provisions</td> <td>A3 A803</td> </tr> <tr> <td>Cargo Only Packing Instructions</td> <td>855</td> </tr> <tr> <td>Cargo Only Maximum Qty / Pack</td> <td>30 L</td> </tr> <tr> <td>Passenger and Cargo Packing Instructions</td> <td>851</td> </tr> <tr> <td>Passenger and Cargo Maximum Qty / Pack</td> <td>1 L</td> </tr> <tr> <td>Passenger and Cargo Limited Quantity Packing Instructions</td> <td>Y840</td> </tr> <tr> <td>Passenger and Cargo Limited Maximum Qty / Pack</td> <td>0.5 L</td> </tr> </table>	Special provisions	A3 A803	Cargo Only Packing Instructions	855	Cargo Only Maximum Qty / Pack	30 L	Passenger and Cargo Packing Instructions	851	Passenger and Cargo Maximum Qty / Pack	1 L	Passenger and Cargo Limited Quantity Packing Instructions	Y840	Passenger and Cargo Limited Maximum Qty / Pack	0.5 L
Special provisions	A3 A803														
Cargo Only Packing Instructions	855														
Cargo Only Maximum Qty / Pack	30 L														
Passenger and Cargo Packing Instructions	851														
Passenger and Cargo Maximum Qty / Pack	1 L														
Passenger and Cargo Limited Quantity Packing Instructions	Y840														
Passenger and Cargo Limited Maximum Qty / Pack	0.5 L														

Sea transport (IMDG-Code / GGVSee)

8332-B Fast Set Epoxy (Part B)

14.1. UN number	2735	
14.2. UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. (contains 2,4,6-tris[(dimethylamino)methyl]phenol)	
14.3. Transport hazard class(es)	IMDG Class	8
	IMDG Subrisk	Not Applicable
14.4. Packing group	II	
14.5. Environmental hazard	Not Applicable	
14.6. Special precautions for user	EMS Number	F-A , S-B
	Special provisions	274
	Limited Quantities	1 L

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

Not Applicable

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

Product name	Group
trimercaptan ether, propoxylated	Not Available
2,4,6-tris[(dimethylamino)methyl]phenol	Not Available

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
trimercaptan ether, propoxylated	Not Available
2,4,6-tris[(dimethylamino)methyl]phenol	Not Available

SECTION 15 Regulatory information

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

trimercaptan ether, propoxylated is found on the following regulatory lists

Not Applicable

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

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable - : Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, - 2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (trimercaptan ether, propoxylated; 2,4,6-tris[(dimethylamino)methyl]phenol)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (trimercaptan ether, propoxylated)
Japan - ENCS	No (trimercaptan ether, propoxylated)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (trimercaptan ether, propoxylated)
Vietnam - NCI	Yes
Russia - FBEPH	No (trimercaptan ether, propoxylated)
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 Other information

8332-B Fast Set Epoxy (Part B)

Revision Date	26/04/2021
Initial Date	19/01/2015

Full text Risk and Hazard codes

H302	Harmful if swallowed.
H315	Causes skin irritation.
H319	Causes serious eye irritation.

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.

For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 166 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average

PC—STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit.

IDLH: Immediately Dangerous to Life or Health Concentrations

ES: Exposure Standard

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value

LOD: Limit Of Detection

OTV: Odour Threshold Value

BCF: BioConcentration Factors

BEI: Biological Exposure Index

AiIC: Australian Inventory of Industrial Chemicals

DSL: Domestic Substances List

NDSL: Non-Domestic Substances List

IECSC: Inventory of Existing Chemical Substance in China

EINECS: European INventory of Existing Commercial chemical Substances

ELINCS: European List of Notified Chemical Substances

NLP: No-Longer Polymers

ENCS: Existing and New Chemical Substances Inventory

KECI: Korea Existing Chemicals Inventory

NZIoC: New Zealand Inventory of Chemicals

PICCS: Philippine Inventory of Chemicals and Chemical Substances

TSCA: Toxic Substances Control Act

TCSI: Taiwan Chemical Substance Inventory

INSQ: Inventario Nacional de Sustancias Químicas

NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

Reason for Change

A-2.00 - New format