

TS Global Redi Repair Primer N85

TS Global

Chemwatch Hazard Alert Code: 3

Chemwatch: 11-26399

Version No: 3.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Issue Date: 10/03/2023

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S.GHS.AUS.EN

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

Product Identifier

Product name	TS Global Redi Repair Primer N85
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	FLAMMABLE LIQUID, N.O.S. (contains ethyl acetate)
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Priming solution.
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Details of the manufacturer or supplier of the safety data sheet

Registered company name	TS Global
Address	8 Laurio Place Mayfield West NSW 2304 Australia
Telephone	+61 2 4968 8500
Fax	Not Available
Website	http://www.tsglobal.net.au
Email	sales@tsglobal.net.au

Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone numbers	+61 1800 951 288
Other emergency telephone numbers	+61 3 9573 3188

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

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	Not Applicable
Classification [1]	Flammable Liquids Category 2, Serious Eye Damage/Eye Irritation Category 2A, Specific Target Organ Toxicity - Single Exposure (Narcotic Effects) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2, Hazardous to the Aquatic Environment Long-Term Hazard Category 2, Hazardous to the Ozone Layer Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
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Signal word	Danger
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Hazard statement(s)

AUH066	Repeated exposure may cause skin dryness and cracking.
H225	Highly flammable liquid and vapour.

TS Global Redi Repair Primer N85

H319	Causes serious eye irritation.
H336	May cause drowsiness or dizziness.
H373	May cause damage to organs through prolonged or repeated exposure.
H411	Toxic to aquatic life with long lasting effects.
H420	Harms public health and the environment by destroying ozone in the upper atmosphere.

Precautionary statement(s) Prevention

P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P240	Ground and bond container and receiving equipment.
P241	Use explosion-proof electrical/ventilating/lighting/intrinsically safe equipment.
P242	Use non-sparking tools.
P243	Take action to prevent static discharges.
P273	Avoid release to the environment.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P264	Wash all exposed external body areas thoroughly after handling.

Precautionary statement(s) Response

P370+P378	In case of fire: Use alcohol resistant foam or normal protein foam to extinguish.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P312	Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.
P337+P313	If eye irritation persists: Get medical advice/attention.
P391	Collect spillage.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or shower].
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

P403+P235	Store in a well-ventilated place. Keep cool.
P405	Store locked up.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
P502	Refer to manufacturer or supplier for information on recovery or recycling.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
141-78-6	<100	ethyl acetate
87-90-1	<5	N,N,N'-trichloroisocyanuric acid
15687-27-1	NotSpec	Ibuprofen
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available	

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ 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.
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. ▶ Transport to hospital, or doctor.
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.

	<ul style="list-style-type: none"> ▶ 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.
Ingestion	<ul style="list-style-type: none"> ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Seek medical advice. ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol. ▶ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

for simple esters:

BASIC TREATMENT

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

ADVANCED TREATMENT

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

EMERGENCY DEPARTMENT

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

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

for non-steroidal anti-inflammatories (NSAIDs)

- ▶ Symptoms following acute NSAIDs overdoses are usually limited to lethargy, drowsiness, nausea, vomiting, and epigastric pain, which are generally reversible with supportive care. Gastrointestinal bleeding can occur. Hypertension, acute renal failure, respiratory depression, and coma may occur, but are rare. Anaphylactoid reactions have been reported with therapeutic ingestion of NSAIDs, and may occur following an overdose.
- ▶ Patients should be managed by symptomatic and supportive care following a NSAIDs overdose.
- ▶ There are no specific antidotes.
- ▶ Emesis and/or activated charcoal (60 to 100 grams in adults, 1 to 2 g/kg in children), and/or osmotic cathartic may be indicated in patients seen within 4 hours of ingestion with symptoms or following a large overdose (5 to 10 times the usual dose).
- ▶ Forced diuresis, alkalisation of urine, hemodialysis, or haemoperfusion may not be useful due to high protein binding.
- ▶ For gastrointestinal haemorrhage, monitor stool guaiac and administer antacids or sucralfate.
- ▶ For mild/moderate allergic reactions, administer antihistamines with or without inhaled beta agonists, corticosteroids, or epinephrine.
- ▶ For severe allergic reactions, administer oxygen, antihistamines, epinephrine, or corticosteroids. Nephritis or nephrotic syndrome, thrombocytopenia, or haemolytic anemia may respond to glucocorticoid administration.
- ▶ For severe acidosis, administer sodium bicarbonate.
- ▶ Administer as required: plasma volume expanders for severe hypotension; diazepam or other benzodiazepine for convulsions; vitamin K1 for hypoprothrombinaemia; and/or dopamine plus dobutamine intravenously to prevent or reverse early indications of renal failure.

Serious gastrointestinal toxicity, such as bleeding, ulceration, and perforation, can occur at any time, with or without warning symptoms, in patients treated chronically with NSAID therapy. Although minor upper gastrointestinal problems, such as dyspepsia, are common, usually developing early in therapy, physicians should remain alert for ulceration and bleeding in patients treated chronically with NSAIDs even in the absence of previous GI tract symptoms. In patients observed in clinical trials of several months to two years duration, symptomatic upper GI ulcers, gross bleeding or perforation appear to occur in approximately 1% of patients treated for 3 to 6 months, and in about 2% to 4% of patients treated for one year. Physicians should inform patients about the signs and/or symptoms of serious GI toxicity and what steps to take if they occur.

Studies to date have not identified any subset of patients not at risk of developing peptic ulceration and bleeding. Except for a prior history of serious GI events and other risk factors known to be associated with peptic ulcer disease, such as alcoholism, smoking, etc., no risk factors (e.g., age, sex) have been associated with increased risk. Elderly or debilitated patients seem to tolerate ulceration or bleeding less well than other individuals, and most spontaneous reports of fatal GI events are in this population. Studies to date are inconclusive concerning the relative risk of various NSAIDs in causing such reactions. High doses of any NSAID probably carry a greater risk of these reactions, although controlled clinical trials showing this do not exist in most cases. In considering the use of relatively large doses (within the recommended dosage range), sufficient benefit should be anticipated to offset the potential increased risk of GI toxicity.

SECTION 5 Firefighting measures

Extinguishing media

- ▶ Alcohol stable foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.

- ▶ Water spray or fog - Large fires only.

Special hazards arising from the substrate or mixture

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

Fire Fighting	<ul style="list-style-type: none"> ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ May be violently or explosively reactive. ▶ Wear breathing apparatus plus protective gloves in the event of a fire. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Consider evacuation (or protect in place). ▶ Fight fire from a safe distance, with adequate cover. ▶ If safe, switch off electrical equipment until vapour fire hazard removed. ▶ Use water delivered as a fine spray to control the fire and cool adjacent area. ▶ Avoid spraying water onto liquid pools. ▶ Do not approach containers suspected to be hot. ▶ Cool fire exposed containers with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Liquid and vapour are highly flammable. ▶ Severe fire hazard when exposed to heat, flame and/or oxidisers. ▶ Vapour may travel a considerable distance to source of ignition. ▶ Heating may cause expansion or decomposition leading to violent rupture of containers. ▶ On combustion, may emit toxic fumes of carbon monoxide (CO). <p>Combustion products include: carbon dioxide (CO₂) nitrogen oxides (NO_x) other pyrolysis products typical of burning organic material.</p> <p>Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.</p>
HAZCHEM	*3YE

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	<p>Slippery when spilt. Environmental hazard - contain spillage.</p> <ul style="list-style-type: none"> ▶ Remove all ignition sources. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb small quantities with vermiculite or other absorbent material. ▶ Wipe up. ▶ Collect residues in a flammable waste container.
Major Spills	<p>Slippery when spilt. Environmental hazard - contain spillage.</p> <ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ May be violently or explosively reactive. ▶ Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Consider evacuation (or protect in place). ▶ No smoking, naked lights or ignition sources. ▶ Increase ventilation. ▶ Stop leak if safe to do so. ▶ Water spray or fog may be used to disperse /absorb vapour. ▶ Contain spill with sand, earth or vermiculite. ▶ Use only spark-free shovels and explosion proof equipment. ▶ Collect recoverable product into labelled containers for recycling. ▶ Absorb remaining product with sand, earth or vermiculite. ▶ Collect solid residues and seal in labelled drums for disposal. ▶ Wash area and prevent runoff into drains. ▶ If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ Containers, even those that have been emptied, may contain explosive vapours. ▶ Do NOT cut, drill, grind, weld or perform similar operations on or near containers. <p>Contains low boiling substance: Storage in sealed containers may result in pressure buildup causing violent rupture of containers not rated appropriately.</p> <ul style="list-style-type: none"> ▶ Check for bulging containers. ▶ Vent periodically ▶ Always release caps or seals slowly to ensure slow dissipation of vapours
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	<ul style="list-style-type: none"> ▶ DO NOT allow clothing wet with material to stay in contact with skin ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ Avoid smoking, naked lights, heat or ignition sources. ▶ When handling, DO NOT eat, drink or smoke. ▶ Vapour may ignite on pumping or pouring due to static electricity. ▶ DO NOT use plastic buckets. ▶ Earth and secure metal containers when dispensing or pouring product. ▶ Use spark-free tools when handling. ▶ Avoid contact with incompatible materials. ▶ Keep containers securely sealed. ▶ Avoid physical damage to containers. ▶ Always wash hands with soap and water after handling. ▶ Work clothes should be laundered separately. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.
Other information	<ul style="list-style-type: none"> ▶ Store in original containers in approved flame-proof area. ▶ No smoking, naked lights, heat or ignition sources. ▶ DO NOT store in pits, depression, basement or areas where vapours may be trapped. ▶ Keep containers securely sealed. ▶ Store away from incompatible materials in a cool, dry well ventilated area. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this MSDS. ▶ Tank storage: Tanks must be specifically designed for use with this product. Bulk storage tanks should be diked (bunded). Locate tanks away from heat and other sources of ignition. Cleaning, inspection and maintenance of storage tanks is a specialist operation, which requires the implementation of strict procedures and precautions. ▶ Keep in a cool place. Electrostatic charges will be generated during pumping. Electrostatic discharge may cause fire. Ensure electrical continuity by bonding and grounding (earthing) all equipment to reduce the risk. The vapours in the head space of the storage vessel may lie in the flammable/explosive range and hence may be flammable. ▶ For containers, or container linings use mild steel, stainless steel. Examples of suitable materials are: high density polyethylene (HDPE), polypropylene (PP), and Viton (FMK), which have been specifically tested for compatibility with this product. ▶ For container linings, use amine-adduct cured epoxy paint. ▶ For seals and gaskets use: graphite, PTFE, Viton A, Viton B. ▶ Unsuitable material: Some synthetic materials may be unsuitable for containers or container linings depending on the material specification and intended use. Examples of materials to avoid are: natural rubber (NR), nitrile rubber (NBR), ethylene propylene rubber (EPDM), polymethyl methacrylate (PMMA), polystyrene, polyvinyl chloride (PVC), polyisobutylene. However, some may be suitable for glove materials. ▶ Do not cut, drill, grind, weld or perform similar operations on or near containers. Containers, even those that have been emptied, can contain explosive vapours.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Packaging as recommended by manufacturer. ▶ Check that containers are clearly labelled. ▶ Tamper-proof containers. ▶ Polyethylene or polypropylene containers. ▶ Metal drum with sealed plastic liner. ▶ Glass container is suitable for laboratory quantities ▶ For low viscosity materials (i) : Drums and jerry cans must be of the non-removable head type. (ii) : Where a can is to be used as an inner package, the can must have a screwed enclosure. ▶ For materials with a viscosity of at least 2680 cSt. (23 deg. C) ▶ For manufactured product having a viscosity of at least 250 cSt. (23 deg. C) ▶ Manufactured product that requires stirring before use and having a viscosity of at least 20 cSt (25 deg. C): (i) Removable head packaging; (ii) Cans with friction closures and (iii) low pressure tubes and cartridges may be used. ▶ Where combination packages are used, and the inner packages are of glass, there must be sufficient inert cushioning material in contact with inner and outer packages ▶ In addition, where inner packagings are glass and contain liquids of packing group I there must be sufficient inert absorbent to absorb any spillage, unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.
Storage incompatibility	<ul style="list-style-type: none"> ▶ Esters react with acids to liberate heat along with alcohols and acids. ▶ Strong oxidising acids may cause a vigorous reaction with esters that is sufficiently exothermic to ignite the reaction products. ▶ Heat is also generated by the interaction of esters with caustic solutions. ▶ Flammable hydrogen is generated by mixing esters with alkali metals and hydrides. ▶ Esters may be incompatible with aliphatic amines and nitrates. ▶ Avoid reaction with oxidising agents ▶ Avoid strong acids, bases.

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	ethyl acetate	Ethyl acetate	200 ppm / 720 mg/m3	1440 mg/m3 / 400 ppm	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
ethyl acetate	1,200 ppm	1,700 ppm	10000** ppm

Ingredient	TEEL-1	TEEL-2	TEEL-3
N',N',N'- trichloroisocyanuric acid	1.2 mg/m ³	13 mg/m ³	80 mg/m ³

Ingredient	Original IDLH	Revised IDLH
ethyl acetate	2,000 ppm	Not Available
N',N',N'- trichloroisocyanuric acid	Not Available	Not Available
Ibuprofen	Not Available	Not Available


Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
N',N',N'- trichloroisocyanuric acid	E	≤ 0.01 mg/m ³
Ibuprofen	E	≤ 0.01 mg/m ³

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.

Exposure controls

Appropriate engineering controls	<p>For potent pharmacological agents:</p> <p>Solutions Handling:</p> <ul style="list-style-type: none"> ▶ Solutions can be handled outside a containment system or without local exhaust ventilation during procedures with no potential for aerosolisation. If the procedures have a potential for aerosolisation, an air-purifying respirator is to be worn by all personnel in the immediate area. ▶ Solutions used for procedures where aerosolisation may occur (e.g., vortexing, pumping) are to be handled within a containment system or with local exhaust ventilation. ▶ In situations where this is not feasible (may include animal dosing), an air-purifying respirator is to be worn by all personnel in the immediate area. If using a ventilated enclosure that has not been validated, wear a half-mask respirator equipped with HEPA cartridges until the enclosure is validated for use. ▶ Ensure gloves are protective against solvents in use. <p>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:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>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.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>For flammable liquids and flammable gases, local exhaust ventilation or a process enclosure ventilation system may be required. Ventilation equipment should be explosion-resistant.</p> <p>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.</p>										
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<p>Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.</p> <ul style="list-style-type: none"> · Adequate ventilation is typically taken to be that which limits the average concentration to no more than 25% of the LEL within the building, room or enclosure containing the dangerous substance. · Ventilation for plant and machinery is normally considered adequate if it limits the average concentration of any dangerous substance that might potentially be present to no more than 25% of the LEL. However, an increase up to a maximum 50% LEL can be acceptable where additional safeguards are provided to prevent the formation of a hazardous explosive atmosphere. For example, gas detectors linked to emergency shutdown of the process might be used together with maintaining or increasing the exhaust ventilation on solvent evaporating ovens and gas turbine enclosures. · Temporary exhaust ventilation systems may be provided for non-routine higher-risk activities, such as cleaning, repair or maintenance in tanks or other confined spaces or in an emergency after a release. The work procedures for such activities should be carefully considered. The atmosphere should be continuously monitored to ensure that ventilation is adequate and the area remains safe. Where workers will enter the space, the ventilation should ensure that the concentration of the dangerous substance does not exceed 10% of the LEL (irrespective of the provision of suitable breathing apparatus) 											

<p>Individual protection measures, such as personal protective equipment</p>	
<p>Eye and face protection</p>	<p>When handling very small quantities of the material eye protection may not be required. For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs:</p> <ul style="list-style-type: none"> ▶ Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent] ▶ Face shield. Full face shield may be required for supplementary but never for primary protection of eyes. ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of 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].
<p>Skin protection</p>	<p>See Hand protection below</p>
<p>Hands/feet protection</p>	<p>For esters:</p> <ul style="list-style-type: none"> ▶ Do NOT use natural rubber, butyl rubber, EPDM or polystyrene-containing materials. <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"> ▶ Rubber gloves (nitrile or low-protein, powder-free latex, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference. ▶ Double gloving should be considered. ▶ PVC gloves. ▶ Change gloves frequently and when contaminated, punctured or torn. ▶ Wash hands immediately after removing gloves. ▶ Protective shoe covers. [AS/NZS 2210] ▶ Head covering.
<p>Body protection</p>	<p>See Other protection below</p>
<p>Other protection</p>	<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. ▶ Some plastic personal protective equipment (PPE) (e.g. gloves, aprons, overshoes) are not recommended as they may produce static electricity. ▶ For large scale or continuous use wear tight-weave non-static clothing (no metallic fasteners, cuffs or pockets). ▶ Non sparking safety or conductive footwear should be considered. Conductive footwear describes a boot or shoe with a sole made from a conductive compound chemically bound to the bottom components, for permanent control to electrically ground the foot an shall dissipate static electricity from the body to reduce the possibility of ignition of volatile compounds. Electrical resistance must range between 0 to 500,000 ohms. Conductive shoes should be stored in lockers close to the room in which they are worn. Personnel who have been issued conductive footwear should not wear them from their place of work to their homes and return.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:

Respiratory protection

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

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

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

Continued...

TS Global Redi Repair Primer N85

Material	CPI
PE/EVAL/PE	A
PVA	A
SARANEX-23 2-PLY	A
BUTYL	B
TEFLON	B
VITON/CHLOROBUTYL	B
BUTYL/NEOPRENE	C
CPE	C
HYPALON	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PVC	C
SARANEX-23	C

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 5 x ES	AB-AUS / Class 1 P2	-	AB-PAPR-AUS / Class 1 P2
up to 25 x ES	Air-line*	AB-2 P2	AB-PAPR-2 P2
up to 50 x ES	-	AB-3 P2	-
50+ x ES	-	Air-line**	-

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

^ - Full-face

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

- ▶ 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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Colourless highly flammable liquid with fruity odour; partly mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	~0.9
Odour	Characteristic	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	*77 (Ibuprofen)	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	*-4 (CC) (ethyl acetate)	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	HIGHLY FLAMMABLE.	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	Partly miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

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

Hazardous decomposition products

See section 5

SECTION 11 Toxicological information**Information on toxicological effects**

Inhaled	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. The main effects of simple esters are irritation, stupor and insensibility. Headache, drowsiness, dizziness, coma and behavioural changes may occur. Exposure to 400ppm ethyl acetate may cause mild eye, nose and throat irritation in an unacclimated persons. However, production workers with regular exposure have better tolerance. Inhalation hazard is increased at higher temperatures.
Ingestion	Acute intoxication by ethyl acetate causes impaired co-ordination, exhilaration, slurred speech, nausea, vomiting, and may progress to stupor, coma and death from failure of breathing or blood circulation. Accidental ingestion of the material may be damaging to the health of the individual. Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result. (ICSC13733)
Skin Contact	Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions 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.
Eye	If applied to the eyes, this material causes severe eye damage. The liquid produces a high level of eye discomfort and is capable of causing pain and severe conjunctivitis. Corneal injury may develop, with possible permanent impairment of vision, if not promptly and adequately treated.
Chronic	Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. Harmful: danger of serious damage to health by prolonged exposure through inhalation, in contact with skin and if swallowed. This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe defects. Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

TS Global Redi Repair Primer N85	TOXICITY	IRRITATION
	Not Available	Not Available
ethyl acetate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >18000 mg/kg ^[2]	Eye (human): 400 ppm
	Inhalation(Mouse) LC50; >18 mg/4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Mouse) LD50; 4100 mg/kg ^[2]	Skin: no adverse effect observed (not irritating) ^[1]
N',N',N'- trichloroisocyanuric acid	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 3125 mg - moderate
	Inhalation(Rat) LC50: >0.09<0.29 mg/4h ^[1]	Eye (rabbit): 50 ug/24h SEVERE
	Oral (Rat) LD50: 406 mg/kg ^[2]	Eye: adverse effect observed (irritating) ^[1]
		Eye: no adverse effect observed (not irritating) ^[1]
		Skin (rabbit): 500 mg - SEVERE
		Skin (rabbit): 500 mg/24h-moderate
	Skin: adverse effect observed (corrosive) ^[1]	
	Skin: no adverse effect observed (not irritating) ^[1]	
Ibuprofen	TOXICITY	IRRITATION
	Oral (Rat) LD50: 636 mg/kg ^[2]	Eye: adverse effect observed (irritating) ^[1]
		Skin: adverse effect observed (irritating) ^[1]
		Skin: no adverse effect observed (not irritating) ^[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	

N',N',N'- TRICHLOROISOCYANURIC ACID	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.
IBUPROFEN	Accumulated studies have proved that non-steroidal anti-inflammatory drugs (NSAIDs) which block inflammation by their actions on arachidonic acid (AA) metabolism have a potential role in cancer chemotherapy and chemoprevention. There is a general acceptance that NSAIDs induce colon cancer in humans. One suggested reason is that the balance between COX and lipoxygenase (LOX) activity determines tumorigenesis critically. Under low COX activity, arachidonic acid released from cell membranes in response to external stimuli is preferentially metabolized by LOX enzymes. The oxygenated lipids (metabolites) produced by LOXs initiate

	<p>subsequent biological reactions, activate cellular signaling mechanisms through specific cell surface receptors, or are further metabolized into potent lipid mediators.</p> <p>There is evidence that a 15-LOX metabolite 13S-HPODE (13S-hydroperoxyoctadecaenoic acid) generated from linoleic acid induces apoptosis in colon cancer.</p> <p>Ingestion of aspirin or other NSAIDs may elicit respiratory, nasal, and gastrointestinal symptoms, as well as dermal changes in a subset of patients with asthma. The sensitivity to cyclooxygenase (COX) inhibitors has led to the hypothesis that NSAIDs may be causing upregulation of the 5-lipoxygenase pathway and its attendant products, the leukotrienes, in these patients. It has been shown increase in urinary leukotriene E₄ (LTE₄) after aspirin ingestion or inhalation of lysine-aspirin in aspirin-sensitive patients with asthma. It has also been demonstrated that pharmacologic blockade at the level of the cysteinyl leukotriene receptor(s) can blunt the bronchospastic response to aspirin. Cysteinyl leukotrienes are potent bronchoconstrictors, induce mucus secretion, and increase vascular permeability. Importantly, inhibition of 5-lipoxygenase blocks not only the respiratory but also the gastrointestinal and dermal reactions to aspirin in aspirin-sensitive patients with asthma. Although these results establish the importance of 5-lipoxygenase products in mediating reactions to aspirin, the cellular source and mechanism of release of these mediators remain unclear.</p> <p>Mast cells, which are a known source of leukotrienes, are activated in the nasal response to aspirin as demonstrated by the detection of nasal tryptase after aspirin challenge. Tryptase is an enzyme specific to mast cells and is an indicator of mast cell activation. Cysteinyl leukotrienes and histamine, which can be produced by mast cells, were detected as well. The occurrence of nasal symptoms, as well as activation of mast cells, in response to aspirin was blocked by zileuton, an inhibitor of 5-lipoxygenase. This confirms that 5-lipoxygenase products are critical to the development of aspirin-induced asthma (ASA-induced) reactions in the nose. It also suggests that 5-lipoxygenase products may have a role in the activation of mast cells during this reaction.</p>
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ETHYL ACETATE & N',N',N'-TRICHLOROISOCYANURIC ACID	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.</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

Toxicity

TS Global Redi Repair Primer N85	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

ethyl acetate	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96h	Fish	>75.6mg/l	2
	EC50	72h	Algae or other aquatic plants	1800-3200mg/l	4
	EC50	48h	Crustacea	164mg/l	1
	EC50	96h	Algae or other aquatic plants	2500mg/l	4
	NOEC(ECx)	72h	Algae or other aquatic plants	>100mg/l	1

N',N',N'- trichloroisocyanuric acid	Endpoint	Test Duration (hr)	Species	Value	Source
	BCF	1008h	Fish	<0.1	7
	NOEC(ECx)	96h	Fish	0.056mg/l	2
	EC50	96h	Algae or other aquatic plants	655mg/l	2
	EC50	72h	Algae or other aquatic plants	>100mg/l	2
	LC50	96h	Fish	0.06-0.11mg/L	4
EC50	48h	Crustacea	0.16-0.18mg/L	4	

Ibuprofen	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96h	Fish	5mg/l	2
	EC50	72h	Algae or other aquatic plants	72.9mg/l	2
	EC50	96h	Algae or other aquatic plants	2.3mg/l	2
	EC50	48h	Crustacea	9.06mg/l	1
	NOEC(ECx)	48h	Crustacea	3.37mg/l	1

Legend: 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 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

On the basis of the available evidence concerning properties and predicted or observed environmental fate and behavior, the material may present a danger to the structure and/ or functioning of the stratospheric ozone layer.

Continued...

Toxic 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.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
ethyl acetate	LOW (Half-life = 14 days)	LOW (Half-life = 14.71 days)
N',N',N'- trichloroisocyanuric acid	HIGH	HIGH
Ibuprofen	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
ethyl acetate	HIGH (BCF = 3300)
N',N',N'- trichloroisocyanuric acid	LOW (BCF = 0.5)
Ibuprofen	MEDIUM (LogKOW = 3.97)

Mobility in soil

Ingredient	Mobility
ethyl acetate	LOW (KOC = 6.131)
N',N',N'- trichloroisocyanuric acid	LOW (KOC = 48.36)
Ibuprofen	LOW (KOC = 394.3)



SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<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. ▶ Dispose of 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.
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SECTION 14 Transport information

Labels Required

	
Marine Pollutant	
HAZCHEM	*3YE

Land transport (ADG)

UN number or ID number	1993
UN proper shipping name	FLAMMABLE LIQUID, N.O.S. (contains ethyl acetate)

Transport hazard class(es)	Class	3
	Subsidiary risk	Not Applicable
Packing group	II	
Environmental hazard	Environmentally hazardous	
Special precautions for user	Special provisions	274
	Limited quantity	1 L

Air transport (ICAO-IATA / DGR)

UN number	1993	
UN proper shipping name	Flammable liquid, n.o.s. * (contains ethyl acetate)	
Transport hazard class(es)	ICAO/IATA Class	3
	ICAO / IATA Subrisk	Not Applicable
	ERG Code	3H
Packing group	II	
Environmental hazard	Environmentally hazardous	
Special precautions for user	Special provisions	A3
	Cargo Only Packing Instructions	364
	Cargo Only Maximum Qty / Pack	60 L
	Passenger and Cargo Packing Instructions	353
	Passenger and Cargo Maximum Qty / Pack	5 L
	Passenger and Cargo Limited Quantity Packing Instructions	Y341
	Passenger and Cargo Limited Maximum Qty / Pack	1 L

Sea transport (IMDG-Code / GGVSee)

UN number	1993	
UN proper shipping name	FLAMMABLE LIQUID, N.O.S. (contains ethyl acetate)	
Transport hazard class(es)	IMDG Class	3
	IMDG Subrisk	Not Applicable
Packing group	II	
Environmental hazard	Marine Pollutant	
Special precautions for user	EMS Number	F-E, S-E
	Special provisions	274
	Limited Quantities	1 L

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

Not Applicable

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

Product name	Group
ethyl acetate	Not Available
N',N',N'- trichloroisocyanuric acid	Not Available
Ibuprofen	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
ethyl acetate	Not Available
N',N',N'- trichloroisocyanuric acid	Not Available
Ibuprofen	Not Available

SECTION 15 Regulatory information**Safety, health and environmental regulations / legislation specific for the substance or mixture**

ethyl acetate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

N',N',N'- trichloroisocyanuric acid is found on the following regulatory lists

Continued...

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Australian Inventory of Industrial Chemicals (AIC)

Ibuprofen is found on the following regulatory lists

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 3

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4

Australian Inventory of Industrial Chemicals (AIC)

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

National Inventory Status

National Inventory	Status
Australia - AIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (ethyl acetate; N',N',N'- trichloroisocyanuric acid; Ibuprofen)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	10/03/2023
Initial Date	23/11/2020

SDS Version Summary

Version	Date of Update	Sections Updated
2.1	23/11/2020	Physical and chemical properties - Appearance, Ecological Information - Environmental, Composition / information on ingredients - Ingredients, Identification of the substance / mixture and of the company / undertaking - Supplier Information, Identification of the substance / mixture and of the company / undertaking - Use, Name
3.1	10/03/2023	Classification change due to full database hazard calculation/update.

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
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
AIC: 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

TS Global Redi Repair Primer N85

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

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