



Jennchem TD 80 and TD 80 Plus Top Down Grouts Jennchem Australia

Chemwatch: 4850-30
Version No: 5.1.1.1
Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 11/11/2020
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L.GHS.AUS.EN

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

Product Identifier

Product name	Jennchem TD 80 and TD 80 Plus Top Down Grouts
Synonyms	TD 80 Grout
Other means of identification	Not Available

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

Relevant identified uses	High strength cementitious grouting.
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Details of the supplier of the safety data sheet

Registered company name	Jennchem Australia
Address	9 Gallipoli Street Smeaton Grange Narellan NSW 2567 Australia
Telephone	+61 2 4648 7550
Fax	+61 2 4648 2939
Website	http://www.jennchem.com.au
Email	sales@jennchem.com.au

Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE
Emergency telephone numbers	+61 2 9186 1132
Other emergency telephone numbers	+61 1800 951 288

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]	Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer 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)

H315	Causes skin irritation.
H318	Causes serious eye damage.
H317	May cause an allergic skin reaction.

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Precautionary statement(s) Prevention

P280	Wear protective gloves/protective clothing/eye protection/face protection.
P261	Avoid breathing dust/fumes.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P362	Take off contaminated clothing and wash before reuse.
P302+P352	IF ON SKIN: Wash with plenty of water.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.

Precautionary statement(s) Storage

Not Applicable

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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SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
65997-15-1	>60	<u>portland cement</u>
68131-74-8.	<10	<u>fly ash - low quartz</u>
68611-44-9	0-10	<u>silica amorphous, fumed</u>
Not Available	balance	Ingredients determined not to be hazardous

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Wash out immediately with fresh running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Seek medical attention without delay; if pain persists or recurs seek medical attention. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	<ul style="list-style-type: none"> ▶ If dust is inhaled, remove from contaminated area. ▶ Encourage patient to blow nose to ensure clear passage of breathing. ▶ If irritation or discomfort persists seek medical attention.
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.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
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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. ▶ Wear breathing apparatus plus protective gloves in the event of a fire.
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	<ul style="list-style-type: none"> ▶ Prevent, by any means available, spillage from entering drains or water courses. ▶ 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.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Non combustible. ▶ Not considered a significant fire risk, however containers may burn.
HAZCHEM	Not Applicable

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<ul style="list-style-type: none"> ▶ Clean up all spills immediately. ▶ Avoid contact with skin and eyes. ▶ Wear impervious gloves and safety glasses. ▶ Use dry clean up procedures and avoid generating dust. ▶ Vacuum up (consider explosion-proof machines designed to be grounded during storage and use). ▶ Do NOT use air hoses for cleaning ▶ Place spilled material in clean, dry, sealable, labelled container.
Major Spills	<ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Control personal contact with the substance, by using protective equipment and dust respirator. ▶ Prevent spillage from entering drains, sewers or water courses. ▶ Recover product wherever possible. Avoid generating dust. ▶ Sweep / shovel up. ▶ If required, wet with water to prevent dusting. ▶ Put residues in labelled plastic bags or other containers for disposal. ▶ Wash area down with large quantity of water 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"> ▶ Limit all unnecessary personal contact. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use. ▶ Avoid physical damage to containers. ▶ Always wash hands with soap and water after handling. ▶ Work clothes should be laundered separately. ▶ Use good occupational work practice. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
Other information	<ul style="list-style-type: none"> ▶ Keep dry. ▶ Store under cover. ▶ Protect containers against physical damage. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

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

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
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Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.

Emergency Limits


Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
silica amorphous, fumed	Silica, amorphous fumed	18 mg/m3	100 mg/m3	630 mg/m3

Ingredient	Original IDLH	Revised IDLH
portland cement	5,000 mg/m3	Not Available
fly ash - low quartz	Not Available	Not Available
silica amorphous, fumed	Not Available	Not Available

MATERIAL DATA

None assigned. Refer to individual constituents.

Exposure controls

Appropriate engineering controls	General exhaust is adequate under normal operating conditions.
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> Safety glasses with side shields; or as required, Chemical goggles. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> Barrier cream PVC gloves Rubber gloves Safety footwear
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> Overalls. Eyewash unit.

Respiratory protection

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

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

^ - Full-face

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Grey cementitious powder; insoluble in water but reacts slowly to cure.		
Physical state	Divided Solid	Relative density (Water = 1)	0.80
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Applicable	Decomposition temperature	Not available.
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available

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Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Reacts	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Applicable	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	Generated dust may be discomforting Effects on lungs are significantly enhanced in the presence of respirable particles. Overexposure to respirable dust may produce wheezing, coughing and breathing difficulties leading to or symptomatic of impaired respiratory function.
Ingestion	The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. Products when wet may be quite alkaline and this alkali action on the skin may contribute to cement contact dermatitis by causing drying and defatting of the skin which may be followed by hardening, cracking, development of lesions, possible infections of lesions and penetration by soluble salts. The material may accentuate any pre-existing dermatitis condition
Eye	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Chronic	Cement dust is an allergen with skin contact and/or dust inhalation possibly causing allergic response or even sensitisation responses

	TOXICITY	IRRITATION
Jennchem TD 80 and TD 80 Plus Top Down Grouts	Not Available	Not Available
portland cement	Not Available	Not Available
fly ash - low quartz	>2000 mg/kg ^[2]	Not Available
silica amorphous, fumed	Inhalation (rat) LC50: 0.45 mg/l/4H ^[2] Oral (rat) LD50: >5000 mg/kg ^[2]	Not Available
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	

PORTLAND CEMENT	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.
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	<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>SILICA AMORPHOUS, FUMED</p>	<p>For silica amorphous: Derived No Adverse Effects Level (NOAEL) in the range of 1000 mg/kg/d.</p> <p>In humans, synthetic amorphous silica (SAS) is essentially non-toxic by mouth, skin or eyes, and by inhalation. Epidemiology studies show little evidence of adverse health effects due to SAS. Repeated exposure (without personal protection) may cause mechanical irritation of the eye and drying/cracking of the skin.</p> <p>When experimental animals inhale synthetic amorphous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, the vast majority of SAS is excreted in the faeces and there is little accumulation in the body. Following absorption across the gut, SAS is eliminated via urine without modification in animals and humans. SAS is not expected to be broken down (metabolised) in mammals.</p> <p>After ingestion, there is limited accumulation of SAS in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated, but appears to be insignificant in animals and humans. SASs injected subcutaneously are subjected to rapid dissolution and removal. There is no indication of metabolism of SAS in animals or humans based on chemical structure and available data. In contrast to crystalline silica, SAS is soluble in physiological media and the soluble chemical species that are formed are eliminated via the urinary tract without modification.</p> <p>Both the mammalian and environmental toxicology of SASs are significantly influenced by the physical and chemical properties, particularly those of solubility and particle size. SAS has no acute intrinsic toxicity by inhalation. Adverse effects, including suffocation, that have been reported were caused by the presence of high numbers of respirable particles generated to meet the required test atmosphere. These results are not representative of exposure to commercial SASs and should not be used for human risk assessment. Though repeated exposure of the skin may cause dryness and cracking, SAS is not a skin or eye irritant, and it is not a sensitiser.</p> <p>Repeated-dose and chronic toxicity studies confirm the absence of toxicity when SAS is swallowed or upon skin contact.</p> <p>Long-term inhalation of SAS caused some adverse effects in animals (increases in lung inflammation, cell injury and lung collagen content), all of which subsided after exposure.</p> <p>Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted with SAS in a number of species, at airborne concentrations ranging from 0.5 mg/m³ to 150 mg/m³. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m³. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m³. The difference in values may be explained by different particle size, and therefore the number of particles administered per unit dose. In general, as particle size decreases so does the NOAEL/LOAEL.</p> <p>Neither inhalation nor oral administration caused neoplasms (tumours). SAS is not mutagenic in vitro. No genotoxicity was detected in in vivo assays. SAS does not impair development of the foetus. Fertility was not specifically studied, but the reproductive organs in long-term studies were not affected.</p> <p>For Synthetic Amorphous Silica (SAS) Repeated dose toxicity Oral (rat), 2 weeks to 6 months, no significant treatment-related adverse effects at doses of up to 8% silica in the diet. Inhalation (rat), 13 weeks, Lowest Observed Effect Level (LOEL) = 1.3 mg/m³ based on mild reversible effects in the lungs. Inhalation (rat), 90 days, LOEL = 1 mg/m³ based on reversible effects in the lungs and effects in the nasal cavity.</p> <p>For silane treated synthetic amorphous silica: Repeated dose toxicity: oral (rat), 28-d, diet, no significant treatment-related adverse effects at the doses tested.</p> <p>There is no evidence of cancer or other long-term respiratory health effects (for example, silicosis) in workers employed in the manufacture of SAS. Respiratory symptoms in SAS workers have been shown to correlate with smoking but not with SAS exposure, while serial pulmonary function values and chest radiographs are not adversely affected by long-term exposure to SAS.</p> <p>For silane, dichlorodimethyl-, reaction products with silica Acute oral toxicity is very low for treated silica. Acute inhalation toxicity was only tested for inhalable particles and is not relevant for the material used industrially. Changes in respiratory organs (inflammatory processes) after repeated exposure were reversible in animals that survived the exposure and were observed above the valid TLV values, only. If TLV values are maintained no health hazards are expected. Repeated dose toxicity is sufficiently investigated. Treated silica is not mutagenic. The NOAEL for repro/developmental toxicity is 500 mg/kg bw.</p> <p>Acute toxicity: In a limit test giving 10% in the diet (5000 mg/kg bw) to rats the acute oral LD50 was determined to be higher than 5000 mg/kg bw. In another study administering single doses of 2500 and 5000 mg/kg bw to rats the LD50 was also concluded to be higher than 5000 mg/kg bw. In an acute oral toxicity study giving still higher single doses in olive oil the LD50 appeared to be above 7900 mg/kg bw. No signs of toxicity were observed in any of these studies.</p> <p>All inhalation testing has been conducted with a substance that differs significantly from the commercial product based on particle size. In these animal tests the experimental design caused the particle size to be reduced resulting in nearly 100% of the particle fraction being below 10 µm and capable of entering the deep lung (alveolar particle fraction). The alveolar fraction is responsible for the toxicological effects (suffocation; overloading of the lung due to poor dust clearance mechanisms) which were observed with LC50 values of > 477, 450, 520-1120, and >2280 mg/m³ and corresponding mass median aerodynamic diameters (MMAD) of 2.9 µm, 1.24 µm, 0.8 – 0.9 µm and 0.15 µm, respectively. In comparison to the particle size used in these acute inhalation animal tests, only minor amounts (less than 1 %) of the commercially available commercial substance have been measured as respirable (alveolar fraction < 10 µm MMAD) using test method EN/DIN 481 (ref.35). Using the same method > 99% of the particle fraction is in excess of 90 µm and can only reach the upper airways (nasal passages and throat) or cannot be inhaled at all. Therefore the tests do not represent the toxicological behavior of the commercial product and are not considered relevant for inclusion in the hazard definition/hazard assessment of the commercial substance.</p> <p>Genetic toxicity: The test substance was not mutagenic in the Bacterial Reverse Mutation Assay (Ames test) with <i>Salmonella typhimurium</i> TA98, TA100, TA1535, TA1537 and TA1538 strains and with <i>E. coli</i> WP2 uvrA strain. Also an in vitro chromosomal aberration study in CHO cells gave negative results.</p> <p>Repeat dose toxicity: A 24-month oral feeding study administering a 100 mg/kg dose to 20 male and 20 female rats resulted in a NOAEL of 100 mg/kg. No clinical signs or treatment-related changes (e.g. bodyweight) were observed. There were no carcinogenic effects. A 6-month oral feeding study showed no treatment-related effects at the given dose of 500 mg/kg bw to rats (40/sex) resulting in a NOAEL of 500 mg/kg bw; a slight progressive – but reversible -transformation of the adrenal cortex in females was attributed to chronic stress. Another oral feeding study (5-8 weeks) exposed rats (5/sex/treatment) to a dose of 500, 1000 or 2000 mg/kg bw initially and increasing these doses gradually to 4000, 8000 and 16000 mg/kg bw, respectively. Decrease in body weight and food consumption combined with apathy and decreased grooming activity and decreased cytoplasmic glycogen in hepatocytes may indicate a starving condition of these animals. At the highest dose group four animals died. The NOAEL was determined to be 500 mg/kg bw (LOAEL = 1000 mg/kg bw). In a limited reported study where a dose of 500 or 1000 mg/kg bw was administered by gavage to 30 rats no treatment-related effects could be found, resulting in a NOAEL of 1000 mg/kg bw.</p> <p>A 13-week inhalation study exposing 70 animals/sex to 35 mg/m³ resulted in granuloma-like lesions of the lungs, accumulations of alveolar macrophages, alveolar spaces filled with granular material, debris and polymorphonuclear leucocytes, alveolar bronchiolisation, interstitial fibrosis and enlarged mediastinal lymph nodes. In a 2-week study administering 0, 31, 87 or 420 mg/m³ to a total number of 40 rats/sex 4 males and 2 females died at the top dose level. The rats at the top dose level showed severe respiratory distress and apathy. A dose-related decrease in body weight was observed at 87 mg/m³ and higher. The lungs showed similar effects as those observed in the 13-week inhalation study. A 3-day study and an 8-12-month study both with a concentration of 50 mg/m³ to rats yielded similar results to the above studies in the lungs and the size of the particles was determined to be smaller than 7 µm. Changes in respiratory organs (inflammatory processes) observed in inhalative repeated dose toxicity testing were reversible in animals that survived the exposure. There was no indication of silicosis. Concentrations of the substances with toxicological effects in inhalative toxicity testing were above the valid TLV values (10mg/m³ USA). If TLV values are maintained no health</p>

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	hazards are expected. Reproductive and developmental toxicity: Two studies are included on repro/developmental toxicity. A 6-month, 1-generation study in rats combining fertility and prenatal toxicity testing administered 500 mg/kg bw in the food to 10 females and 2 males. No treatment-related effects were observed in the parents or in the offspring. Therefore the NOAEL for parents and offspring was 500 mg/kg. No effects on the female/male gonads were observed. In a 2-generation reproduction study 20 male and 20 female rats were given 100 mg/kg bw via oral feed for 24 months (see also repeated dose). No abnormalities were observed in the offspring resulting in a NOAEL of 100 mg/kg bw.
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PORTLAND CEMENT & FLY ASH - LOW QUARTZ	No significant acute toxicological data identified in literature search.
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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

	Endpoint	Test Duration (hr)	Species	Value	Source
Jennchem TD 80 and TD 80 Plus Top Down Grouts	Not Available	Not Available	Not Available	Not Available	Not Available
portland cement	Not Available	Not Available	Not Available	Not Available	Not Available
fly ash - low quartz	NOEC	48	Fish	ca.700.0-2000mg/L	1
silica amorphous, fumed	NOEC	24	Crustacea	>=10000mg/L	1

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

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

Bioaccumulative potential

Ingredient	Bioaccumulation
	No Data available for all ingredients

Mobility in soil

Ingredient	Mobility
	No Data available for all ingredients

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Recycle wherever possible or consult manufacturer for recycling options. ▶ Consult State Land Waste Management Authority for disposal. ▶ Bury residue in an authorised landfill. ▶ Recycle containers if possible, or dispose of in an authorised landfill.
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SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

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

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

Not Applicable

SECTION 15 Regulatory information

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

portland cement is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

fly ash - low quartz is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

silica amorphous, fumed is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

National Inventory Status

National Inventory	Status
Australia - AIIC	Yes
Australia - Non-Industrial Use	No (portland cement; fly ash - low quartz; silica amorphous, fumed)
Canada - DSL	Yes
Canada - NDSL	No (portland cement; fly ash - low quartz; silica amorphous, fumed)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (portland cement; fly ash - low quartz; silica amorphous, fumed)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (portland cement)
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	No (fly ash - low quartz)
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

Revision Date	11/11/2020
Initial Date	08/30/2012

SDS Version Summary

Version	Issue Date	Sections Updated
4.1.1.1	11/01/2019	One-off system update. NOTE: This may or may not change the GHS classification
5.1.1.1	11/11/2020	Classification, Name

Other information

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

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

Definitions and abbreviations

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

BEI: Biological Exposure Index

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