1-[2-(Dimethylamino)ethyl]piperazine

Apollo Scientific

Chemwatch Hazard Alert Code: **3**

Part Number: **OR6907**
Version No: **2.2**
Safety Data Sheet

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S.GHS.GB-NIR.EN

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

Product Identifier

Product name	1-[2-(Dimethylamino)ethyl]piperazine
Chemical Name	1-[2-(dimethylamino)ethyl]piperazine
Synonyms	Not Available
Proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S.
Other means of identification	Not Available
CAS number	3644-18-6*

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

Relevant identified uses	Not Available

Details of the manufacturer or supplier of the safety data sheet

Registered company name	**Apollo Scientific**	**Apollo Scientific ltd**
Address	Whitefield Road, Bredbury SK62QR United Kingdom	Whitefield Road, Bredbury Cheshire SK6 2QR United Kingdom (NI)
Telephone	01614060505	+44(0) 161 406 0505
Fax	0161 406 0506	Not Available
Website	http://www.apolloscientific.co.uk/	apolloscientific.co.uk
Email	sales@apolloscientific.co.uk	sales@apolloscientific.co.uk

Emergency telephone number

Association / Organisation	**Not Available**
Emergency telephone numbers	Not Available
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Classification according to regulation (EC) No 1272/2008 [CLP] and amendments [1]	H314 - Skin Corrosion/Irritation Category 1B, H290 - Corrosive to Metals Category 1, H318 - Serious Eye Damage/Eye Irritation Category 1, H332 - Acute Toxicity (Inhalation) Category 4, H302 - Acute Toxicity (Oral) Category 4

Legend:	*1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI*

Label elements

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

Hazard statement(s)

H314	Causes severe skin burns and eye damage.
H290	May be corrosive to metals.
H332	Harmful if inhaled.
H302	Harmful if swallowed.

Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P234	Keep only in original packaging.
P270	Do not eat, drink or smoke when using this product.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or shower].
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P363	Wash contaminated clothing before reuse.
P390	Absorb spillage to prevent material damage.
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

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.

SECTION 3 Composition / information on ingredients

Substances

CAS No	%[weight]	Name	Classification according to regulation (EC) No 1272/2008 [CLP] and amendments	SCL / M-Factor
3644-18-6*	100	1-[2-(Dimethylamino)ethyl]piperazine	Skin Corrosion/Irritation Category 1B, Corrosive to Metals Category 1, Serious Eye Damage/Eye Irritation Category 1, Acute Toxicity (Inhalation) Category 4, Acute Toxicity (Oral) Category 4; H314, H290, H332, H302 [1]	Not Available

Legend: *1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 3. Classification drawn from C&L; * EU IOELVs available; [e] Substance identified as having endocrine disrupting properties*

Mixtures

See section above for composition of Substances

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: ▸ 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. For amines: ▸ If liquid amines come in contact with the eyes, irrigate immediately and continuously with low pressure flowing water, preferably from an eye wash fountain, for 15 to 30 minutes. ▸ For more effective flushing of the eyes, use the fingers to spread apart and hold open the eyelids. The eyes should then be "rolled" or moved in all directions. ▸ Seek immediate medical attention, preferably from an ophthalmologist.
Skin Contact	If skin or hair contact occurs: ▸ 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. For amines: ▸ In case of major exposure to liquid amine, promptly remove any contaminated clothing, including rings, watches, and shoe, preferably under a safety shower. ▸ Wash skin for 15 to 30 minutes with plenty of water and soap. Call a physician immediately. ▸ Remove and dry-clean or launder clothing soaked or soiled with this material before reuse. Dry cleaning of contaminated clothing may be more effective than normal laundering. ▸ Inform individuals responsible for cleaning of potential hazards associated with handling contaminated clothing. ▸ Discard contaminated leather articles such as shoes, belts, and watchbands. ▸ Note to Physician: Treat any skin burns as thermal burns. After decontamination, consider the use of cold packs and topical antibiotics.
Inhalation	▸ If fumes or combustion products are inhaled remove from contaminated area. ▸ Lay patient down. Keep warm and rested. ▸ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▸ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▸ Transport to hospital, or doctor, without delay. ▸ Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. ▸ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). ▸ As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. ▸ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. **This must definitely be left to a doctor or person authorised by him/her.** (ICSC13719) For amines: ▸ All employees working in areas where contact with amine catalysts is possible should be thoroughly trained in the administration of appropriate first aid procedures. ▸ Experience has demonstrated that prompt administration of such aid can minimize the effects of accidental exposure. ▸ Promptly move the affected person away from the contaminated area to an area of fresh air. ▸ Keep the affected person calm and warm, but not hot. ▸ If breathing is difficult, oxygen may be administered by a qualified person. ▸ If breathing stops, give artificial respiration. Call a physician at once.
Ingestion	▸ For advice, contact a Poisons Information Centre or a doctor at once. ▸ Urgent hospital treatment is likely to be needed. ▸ If swallowed do **NOT** induce vomiting. ▸ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▸ Observe the patient carefully. ▸ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▸ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▸ Transport to hospital or doctor without delay. For amines: ▸ If liquid amine are ingested, have the affected person drink several glasses of water or milk. ▸ Do not induce vomiting. ▸ Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.

Indication of any immediate medical attention and special treatment needed

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

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

Alkalis continue to cause damage after exposure.
INGESTION:

- Milk and water are the preferred diluents

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

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

* Catharsis and emesis are absolutely contra-indicated.
* Activated charcoal does not absorb alkali.
* Gastric lavage should not be used.

Supportive care involves the following:

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

SKIN AND EYE:

- Injury should be irrigated for 20-30 minutes.

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

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

Laboratory animal studies have shown that a few amines are suspected of causing depletion of certain white blood cells and their precursors in lymphoid tissue. These effects may be due to an immunosuppressive mechanism.
Some persons with hyperreactive airways (e.g., asthmatic persons) may experience wheezing attacks (bronchospasm) when exposed to airway irritants.
Lung injury may result following a single massive overexposure to high vapour concentrations or multiple exposures to lower concentrations of any pulmonary irritant material.
Health effects of amines, such as skin irritation and transient corneal edema (“blue haze,” “halo effect,” “glaucopsia”), are best prevented by means of formal worker education, industrial hygiene monitoring, and exposure control methods. Persons who are highly sensitive to the triggering effect of non-specific irritants should not be assigned to jobs in which such agents are used, handled, or manufactured.
Medical surveillance programs should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation.
Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling.
Medical personnel conducting medical surveillance of individuals potentially exposed to polyurethane amine catalysts should consider the following:

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

Persons who are concurrently exposed to isocyanates also should be kept under medical surveillance.
Pre-existing medical conditions generally aggravated by exposure include skin disorders and allergies, chronic respiratory disease (e.g. bronchitis, asthma, emphysema), liver disorders, kidney disease, and eye disease.
Broadly speaking, exposure to amines, as characterised by amine catalysts, may cause effects similar to those caused by exposure to ammonia. As such, amines should be considered potentially injurious to any tissue that is directly contacted.
Inhalation of aerosol mists or vapors, especially of heated product, can result in chemical pneumonitis, pulmonary edema, laryngeal edema, and delayed scarring of the airway or other affected organs. There is no specific treatment.
Clinical management is based upon supportive treatment, similar to that for thermal burns.
Persons with major skin contact should be maintained under medical observation for at least 24 hours due to the possibility of delayed reactions.
Polyurethene Amine Catalysts: Guidelines for Safe Handling and Disposal Technical Bulletin June 2000
Alliance for Polyurethanes Industry

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

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

Advice for firefighters

Fire Fighting	For amines: ‣ For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode. ‣ Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions. ‣ Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user.
Fire/Explosion Hazard	‣ Combustible. ‣ Slight fire hazard when exposed to heat or flame. ‣ Heating may cause expansion or decomposition leading to violent rupture of containers. ‣ On combustion, may emit toxic fumes of carbon monoxide (CO). ‣ May emit acrid smoke. ‣ Mists containing combustible materials may be explosive. Combustion products include: carbon dioxide (CO_2) other pyrolysis products typical of burning organic material. May emit corrosive fumes.

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	‣ Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. ‣ Check regularly for spills and leaks. ‣ Clean up all spills immediately. ‣ Avoid breathing vapours and contact with skin and eyes. ‣ Control personal contact with the substance, by using protective equipment. ‣ Contain and absorb spill with sand, earth, inert material or vermiculite. ‣ Wipe up. ‣ Place in a suitable, labelled container for waste disposal. for amines: ‣ If possible (i.e., without risk of contact or exposure), stop the leak. ‣ Contain the spilled material by diking, then neutralize. ‣ Next, absorb the neutralized product with clay, sawdust, vermiculite, or other inert absorbent and shovel into containers. ‣ Store the containers outdoors. ‣ Brooms and mops should be disposed of, along with any remaining absorbent, in accordance with all applicable federal, state, and local regulations and requirements. ‣ Decontamination of floors and other hard surfaces after the spilled material has been removed may be accomplished by using a 5% solution of acetic acid, followed by very hot water ‣ Dispose of the material in full accordance with all federal, state, and local laws and regulations governing the disposal of chemical wastes. ‣ Waste materials from an amine catalyst spill or leak may be “hazardous wastes” that are regulated under various laws.
Major Spills	For amines: ‣ First remove all ignition sources from the spill area. ‣ Have firefighting equipment nearby, and have firefighting personnel fully trained in the proper use of the equipment and in the procedures used in fighting a chemical fire. ‣ Spills and leaks of polyurethane amine catalysts should be contained by diking, if necessary, and cleaned up only by properly trained and equipped personnel. All others should promptly leave the contaminated area and stay upwind. ‣ Protective equipment for cleanup crews should include appropriate respiratory protective devices and impervious clothing, footwear, and gloves. ‣ All work areas should be equipped with safety showers and eyewash fountains in good working order. ‣ Any material spilled or splashed onto the skin should be quickly washed off. ‣ Spills or releases may need to be reported to federal, state, and local authorities. This reporting contingency should be a part of a site s emergency response plan. ‣ Protective equipment should be used during emergency situations whenever there is a likelihood of exposure to liquid amines or to excessive concentrations of amine vapor. “Emergency” may be defined as any occurrence, such as, but not limited to,

	equipment failure, rupture of containers, or failure of control equipment that results in an uncontrolled release of amine liquid or vapor. ▸ Emergency protective equipment should include: ▸ • Self-contained breathing apparatus, with full face-piece, operated in positive pressure or pressure-demand mode. ▸ • Rubber gloves ▸ • Long-sleeve coveralls or impervious full body suit ▸ • Head protection, such as a hood, made of material(s) providing protection against amine catalysts ▸ Firefighting personnel and other on-site Emergency Responders should be fully trained in Chemical Emergency Procedures. However back-up from local authorities should be sought

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	▸ Avoid all personal contact, including inhalation. ▸ Wear protective clothing when risk of exposure occurs. ▸ Use in a well-ventilated area. ▸ Avoid contact with moisture. ▸ Avoid contact with incompatible materials. ▸ When handling, **DO NOT** eat, drink or smoke. ▸ Keep containers securely sealed when not in use. ▸ Avoid physical damage to containers. ▸ Always wash hands with soap and water after handling. ▸ Work clothes should be laundered separately. Launder contaminated clothing before re-use. ▸ Use good occupational work practice. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS. ▸ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained. ▸ **DO NOT** allow clothing wet with material to stay in contact with skin
Other information	▸ Store in original containers. ▸ Keep containers securely sealed. ▸ Store in a cool, dry, well-ventilated area. ▸ Store away from incompatible materials and foodstuff containers. ▸ Protect containers against physical damage and check regularly for leaks. ▸ Observe manufacturer's storage and handling recommendations contained within this SDS. ▸ **DO NOT** store near acids, or oxidising agents ▸ No smoking, naked lights, heat or ignition sources.

Conditions for safe storage, including any incompatibilities

Suitable container	▸ Lined metal can, lined metal pail/ can. ▸ Plastic pail. ▸ Polyliner drum. ▸ Packing as recommended by manufacturer. ▸ Check all containers are clearly labelled and free from leaks. For low viscosity materials ▸ Drums and jerricans must be of the non-removable head type. ▸ Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.): ▸ Removable head packaging; ▸ Cans with friction closures and ▸ low pressure tubes and cartridges may be used. - Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.
Storage incompatibility	▸ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. ▸ Avoid reaction with oxidising agents Amines are incompatible with: · isocyanates, halogenated organics, peroxides, phenols (acidic), epoxides, anhydrides, and acid halides. · strong reducing agents such as hydrides, due to the liberation of flammable gas. Amines possess a characteristic ammonia smell, liquid amines have a distinctive "fishy" smell. Amines are formally derivatives of ammonia, wherein one or more hydrogen atoms have been replaced by a substituent such as an alkyl or aryl group. Compounds with a nitrogen atom attached to a carbonyl group, thus having the structure R–CO–NR'R?, are called amides and have different chemical properties from amines.

The water solubility of simple amines is enhanced by hydrogen bonding involving these lone electron pairs. Typically salts of ammonium compounds exhibit the following order of solubility in water: primary ammonium (RNH+3) > secondary ammonium (R2NH+2) > tertiary ammonium (R3NH+). Small aliphatic amines display significant solubility in many solvents, whereas those with large substituents are lipophilic. Aromatic amines, such as aniline, have their lone pair electrons conjugated into the benzene ring, thus their tendency to engage in hydrogen bonding is diminished. Their boiling points are high and their solubility in water is low.
Like ammonia, amines are bases. Compared to alkali metal hydroxides, amines are weaker.
· The basicity of amines depends on:
· The electronic properties of the substituents (alkyl groups enhance the basicity, aryl groups diminish it).
The degree of solvation of the protonated amine, which includes steric hindrance by the groups on nitrogen.
Owing to inductive effects, the basicity of an amine might be expected to increase with the number of alkyl groups on the amine. Correlations are complicated owing to the effects of solvation which are opposite the trends for inductive effects. Solvation effects also dominate the basicity of aromatic amines.
Solvation significantly affects the basicity of amines. N-H groups strongly interact with water, especially in ammonium ions. Consequently, the basicity of ammonia is enhanced by 10 exp 11 by solvation.
Tertiary amines are more basic than secondary amines, which are more basic than primary amines, and finally ammonia is least basic. The order of pKb's (basicities in water) does not follow this order. Similarly aniline is more basic than ammonia in the gas phase, but ten thousand times less so in aqueous solution.
In aprotic polar solvents such as DMSO, DMF, and acetonitrile the energy of solvation is not as high as in protic polar solvents like water and methanol. For this reason, the basicity of amines in these aprotic solvents is almost solely governed by the electronic effect

- Store under argon

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
1-[2-(Dimethylamino)ethyl]piperazine	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
1-[2-(Dimethylamino)ethyl]piperazine	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
1-[2-(Dimethylamino)ethyl]piperazine	E	≤ 0.1 ppm
Notes:	*Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.*	

Exposure controls

Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.
The basic types of engineering controls are:
Process controls which involve changing the way a job activity or process is done to reduce the risk.
Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.
Employers may need to use multiple types of controls to prevent employee overexposure.

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.
An approved self contained breathing apparatus (SCBA) may be required in some situations.
Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:

solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)

Within each range the appropriate value depends on:

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

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

Individual protection measures, such as personal protective equipment

Eye and face protection

- Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent]
- 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].

For amines:
SPECIAL PRECAUTION:

- Because amines are alkaline materials that can cause rapid and severe tissue damage, wearing of contact lenses while working with amines is strongly discouraged. Wearing such lenses can prolong contact of the eye tissue with the amine, thereby causing more severe damage.
- Appropriate eye protection should be worn whenever amines are handled or whenever there is any possibility of direct contact with liquid products, vapors, or aerosol mists.

CAUTION:

- Ordinary safety glasses or face-shields will not prevent eye irritation from high concentrations of vapour.
- In operations where positive-pressure, air-supplied breathing apparatus is not required, all persons handling liquid amine catalysts or other polyurethane components in open containers should wear chemical workers safety goggles.
- Eyewash fountains should be installed, and kept in good working order, wherever amines are used.

Skin protection

See Hand protection below

Hands/feet protection

- Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber
- When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

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.
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.
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.
Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:
· frequency and duration of contact,
· chemical resistance of glove material,
· glove thickness and
· dexterity

	Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent). · 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. As defined in ASTM F-739-96 in any application, gloves are rated as: · Excellent when breakthrough time > 480 min · Good when breakthrough time > 20 min · Fair when breakthrough time < 20 min · Poor when glove material degrades For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended. 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. 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. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: · 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 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. ▸ Leather wear not recommended: Contaminated leather footwear, watch bands, should be destroyed, i.e. burnt, as they cannot be adequately decontaminated For amines: ▸ Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. ▸ Application of a non-perfumed moisturiser is recommended ▸ Where there is a possibility of exposure to liquid amines skin protection should include: rubber gloves, (neoprene, nitrile, or butyl). ▸ DO NOT USE latex.
Body protection	See Other protection below
Other protection	▸ Overalls. ▸ PVC Apron. ▸ PVC protective suit may be required if exposure severe. ▸ Eyewash unit. ▸ Ensure there is ready access to a safety shower.

Respiratory protection

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

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

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

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

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

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Not Available

Physical state	Liquid	**Relative density (Water = 1)**	Not Available
Odour	Not Available	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Available
pH (as supplied)	Not Available	**Decomposition temperature (°C)**	Not Available
Melting point / freezing point (°C)	Not Available	**Viscosity (cSt)**	Not Available
Initial boiling point and boiling range (°C)	90/9mm	**Molecular weight (g/mol)**	Not Available
Flash point (°C)	Not Available	**Taste**	Not Available
Evaporation rate	Not Available	**Explosive properties**	Not Available
Flammability	Not Available	**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	Not Available	**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	- 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	The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung

	damage. Inhalation of amine vapours may cause irritation of the mucous membrane of the nose and throat, and lung irritation with respiratory distress and cough. Swelling and inflammation of the respiratory tract is seen in serious cases; with headache, nausea, faintness and anxiety. The material has **NOT** been classified by EC Directives or other classification systems as "harmful by inhalation". This is because of the lack of corroborating animal or human evidence.
Ingestion	The material can produce chemical burns within the oral cavity and gastrointestinal tract following 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.
Skin Contact	The material can produce chemical burns following direct contact with the skin. Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. Volatile amine vapours produce irritation and inflammation of the skin. Direct contact can cause burns. 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	The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage. Vapours of volatile amines irritate the eyes, causing excessive secretion of tears, inflammation of the conjunctiva and slight swelling of the cornea, resulting in "halos" around lights. This effect is temporary, lasting only for a few hours. However this condition can reduce the efficiency of undertaking skilled tasks, such as driving a car. Direct eye contact with liquid volatile amines may produce eye damage, permanent for the lighter species.
Chronic	Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

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*

1-[2-(Dimethylamino)ethyl]piperazine	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. Overexposure to most of these materials may cause adverse health effects. Many amine-based compounds can cause release of histamines, which, in turn, can trigger allergic and other physiological effects, including constriction of the bronchi or asthma and inflammation of the cavity of the nose. Whole-body symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, rapid heartbeat, itching, reddening of the skin, urticaria (hives) and swelling of the face, which are usually transient. There are generally four routes of possible or potential exposure: inhalation, skin contact, eye contact, and swallowing. Inhalation: Inhaling vapours may result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs. Higher concentrations of certain amines can produce severe respiratory irritation, characterized by discharge from the nose, coughing, difficulty in breathing and chest pain. Chronic exposure via inhalation may cause headache, nausea, vomiting, drowsiness, sore throat, inflammation of the bronchi and lungs, and possible lung damage. Repeated and/or prolonged exposure to some amines may result in liver disorders, jaundice and liver enlargement. Some amines have been shown to cause kidney, blood and central nervous system disorders in animal studies. While most polyurethane amine catalysts are not sensitisers, some certain individuals may also become sensitized to amines and my experience distress while breathing, including asthma-like attacks, whenever they are subsequently exposed to even very small amounts of vapours. Once sensitized, these individuals must avoid any further exposure to amines. Chronic overexposure may lead to permanent lung injury, including reduction in lung function, breathlessness, chronic inflammation of the bronchi, and immunologic lung disease. Products with higher vapour pressures may reach higher concentrations in the air, and this increases the likelihood of worker exposure. Inhalation hazards are increased when exposure to amine catalysts occurs in situations that produce aerosols, mists or heated vapours. Such situations include leaks in fitting or transfer lines. Medical conditions generally aggravated by

	inhalation exposure include asthma, bronchitis and emphysema. Skin contact: Skin contact with amine catalysts poses a number of concerns. Direct skin contact can cause moderate to severe irritation and injury, from simple redness and swelling to painful blistering, ulceration, and chemical burns. Repeated or prolonged exposure may also result in severe cumulative skin inflammation. Skin contact with some amines may result in allergic sensitization. Sensitised persons should avoid all contact with amine catalysts. Whole-body effects resulting from the absorption of the amines though skin exposure may include headaches, nausea, faintness, anxiety, decrease in blood pressure, reddening of the skin, hives, and facial swelling. These symptoms may be related to the pharmacological action of the amines, and they are usually temporary. Eye contact: Amine catalysts are alkaline and their vapours are irritating to the eyes, even at low concentrations. Direct contact with liquid amine may cause severe irritation and tissue injury, and the “burning” may lead to blindness. Contact with solid products may result in mechanical irritation, pain and corneal injury. Exposed persons may experience excessive tearing, burning, inflammation of the conjunctiva, and swelling of the cornea, which manifests as a blurred or foggy vision with a blue tint, and sometimes a halo phenomenon around lights. These symptoms are temporary and usually disappear when exposure ends. Some people may experience this effect even when exposed to concentrations that do not cause respiratory irritation. Ingestion: Amine catalysts have moderate to severe toxicity if swallowed. Some amines can cause severe irritation, ulcers and burns of the mouth, throat, gullet and gastrointestinal tract. Material aspirated due to vomiting can damage the bronchial tubes and the lungs. Affected people may also experience pain in the chest or abdomen, nausea, bleeding of the throat and gastrointestinal tract, diarrhea, dizziness, drowsiness, thirst, collapse of circulation, coma and even death.

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

Legend:	*Extracted from 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*

Prevent, by any means available, spillage from entering drains or water courses.
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	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. A Hierarchy of Controls seems to be common - the user should investigate:

- Reduction
- Reuse
- Recycling
- Disposal (if all else fails)

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.

- **DO NOT** allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Treat and neutralise at an approved treatment plant.
- Treatment should involve: Neutralisation with suitable dilute acid followed by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material).
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO

Land transport (ADR-RID)

UN number or ID number	2735
UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S.
Transport hazard class(es)	Class: 8 Subsidiary risk: Not Applicable
Packing group	III
Environmental hazard	Not Applicable
Special precautions for user	Hazard identification (Kemler): 80 Classification code: C7 Hazard Label: 8 Special provisions: 274 Limited quantity: 5 L Tunnel Restriction Code: 3 (E)

Air transport (ICAO-IATA / DGR)

UN number	2735
UN proper shipping name	Amines, liquid, corrosive, n.o.s. *; Polyamines, liquid, corrosive, n.o.s. *
Transport hazard class(es)	ICAO/IATA Class: 8 ICAO / IATA Subrisk: Not Applicable ERG Code: 8L
Packing group	III
Environmental hazard	Not Applicable
Special precautions for user	Special provisions: A3 A803 Cargo Only Packing Instructions: 856 Cargo Only Maximum Qty / Pack: 60 L

Passenger and Cargo Packing Instructions	852
Passenger and Cargo Maximum Qty / Pack	5 L
Passenger and Cargo Limited Quantity Packing Instructions	Y841
Passenger and Cargo Limited Maximum Qty / Pack	1 L

Sea transport (IMDG-Code / GGVSee)

UN number	2735
UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S.
Transport hazard class(es)	IMDG Class: 8 IMDG Subrisk: Not Applicable
Packing group	III
Environmental hazard	Not Applicable
Special precautions for user	EMS Number: F-A, S-B Special provisions: 223 274 Limited Quantities: 5 L

Inland waterways transport (ADN)

UN number	2735
UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S.
Transport hazard class(es)	8 Not Applicable
Packing group	III
Environmental hazard	Not Applicable
Special precautions for user	Classification code: C7 Special provisions: 274 Limited quantity: 5 L Equipment required: PP, EP Fire cones number: 0

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
1-[2-(Dimethylamino)ethyl]piperazine	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
1-[2-(Dimethylamino)ethyl]piperazine	Not Available

SECTION 15 Regulatory information

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

1-[2-(Dimethylamino)ethyl]piperazine is found on the following regulatory lists

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	No (1-[2-(Dimethylamino)ethyl]piperazine)

National Inventory	Status
Canada - DSL	No (1-[2-(Dimethylamino)ethyl]piperazine)
Canada - NDSL	No (1-[2-(Dimethylamino)ethyl]piperazine)
China - IECSC	No (1-[2-(Dimethylamino)ethyl]piperazine)
Europe - EINEC / ELINCS / NLP	No (1-[2-(Dimethylamino)ethyl]piperazine)
Japan - ENCS	No (1-[2-(Dimethylamino)ethyl]piperazine)
Korea - KECI	No (1-[2-(Dimethylamino)ethyl]piperazine)
New Zealand - NZIoC	No (1-[2-(Dimethylamino)ethyl]piperazine)
Philippines - PICCS	No (1-[2-(Dimethylamino)ethyl]piperazine)
USA - TSCA	No (1-[2-(Dimethylamino)ethyl]piperazine)
Taiwan - TCSI	Yes
Mexico - INSQ	No (1-[2-(Dimethylamino)ethyl]piperazine)
Vietnam - NCI	No (1-[2-(Dimethylamino)ethyl]piperazine)
Russia - FBEPH	No (1-[2-(Dimethylamino)ethyl]piperazine)
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	04/07/2023
Initial Date	04/07/2023

SDS Version Summary

Version	Date of Update	Sections Updated
1.2	04/07/2023	Toxicological information - Acute Health (eye), Physical and chemical properties - Appearance, CAS Number, Composition / information on ingredients - Ingredients, Korean MSDS Number, Identification of the substance / mixture and of the company / undertaking - Supplier Information, Identification of the substance / mixture and of the company / undertaking - Synonyms

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.
The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.
For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:
EN 166 Personal eye-protection
EN 340 Protective clothing
EN 374 Protective gloves against chemicals and micro-organisms
EN 13832 Footwear protecting against chemicals
EN 133 Respiratory protective devices

Definitions and abbreviations

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

BEI: Biological Exposure Index
AIIC: Australian Inventory of Industrial Chemicals
DSL: Domestic Substances List
NDSL: Non-Domestic Substances List
IECSC: Inventory of Existing Chemical Substance in China
EINECS: European INventory of Existing Commercial chemical Substances
ELINCS: European List of Notified Chemical Substances
NLP: No-Longer Polymers
ENCS: Existing and New Chemical Substances Inventory
KECI: Korea Existing Chemicals Inventory
NZIoC: New Zealand Inventory of Chemicals
PICCS: Philippine Inventory of Chemicals and Chemical Substances
TSCA: Toxic Substances Control Act
TCSI: Taiwan Chemical Substance Inventory
INSQ: Inventario Nacional de Sustancias Químicas
NCI: National Chemical Inventory
FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

Classification and procedure used to derive the classification for mixtures according to Regulation (EC) 1272/2008 [CLP]

Classification according to regulation (EC) No 1272/2008 [CLP] and amendments	Classification Procedure
Skin Corrosion/Irritation Category 1B, H314	Expert judgement
Corrosive to Metals Category 1, H290	On basis of test data
Serious Eye Damage/Eye Irritation Category 1, H318	Calculation method
Acute Toxicity (Inhalation) Category 4, H332	Expert judgement
Acute Toxicity (Oral) Category 4, H302	Expert judgement

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