

ARDEX K900 BF Ardex (Ardex Australia)

Chemwatch: **5427-71** Version No: **2.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: **24/09/2020** Print Date: **05/10/2020** S.GHS.AUS.EN

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

Product Identifier	
Product name	ARDEX K900 BF
Synonyms	Not Available
Other means of identification	Not Available

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

Details of the supplier of the safety data sheet

Registered company name	Ardex (Ardex Australia)	
Address	Address 20 Powers Road Seven Hills NSW 2147 Australia	
Telephone	1800 224 070	
Fax	1300 780 102	
Website	Not Available	
Email	Not Available	

Emergency telephone number

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

ChemWatch Hazard Ratings

	Min	Max	
Flammability	0		
Toxicity	1		0 = Minimum
Body Contact	3	¦	1 = Low
Reactivity	0		2 = Moderate
Chronic	3		3 = High 4 = Extreme

Poisons Schedule Not Applicable	
Classification ^[1]	Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Carcinogenicity Category 1A, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)
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

Hazard statement(s)

H315	Causes skin irritation.
H318	Causes serious eye damage.
H317	May cause an allergic skin reaction.
H350	May cause cancer.
H335	May cause respiratory irritation.

Precautionary statement(s) Prevention

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

Precautionary statement(s) Response

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

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

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

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
14808-60-7.	30-60	graded sand
65997-15-1	10-30	portland cement
471-34-1	10-30	calcium carbonate
7778-18-9	1-10	calcium sulfate
65997-16-2	1-10	calcium aluminate cement
14808-60-7	<1	silica crystalline - quartz
304-59-6	<1	potassium sodium tartrate
554-13-2	<1	lithium carbonate
Not Available	balance	Ingredients determined not to be hazardous

SECTION 4 First aid measures

D

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.	
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.	
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. 	

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Ingestion

- 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.

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SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area.
Fire/Explosion Hazard	 Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: sulfur oxides (SOx) silicon dioxide (SiO2) metal oxides When aluminium oxide dust is dispersed in air, firefighters should wear protection against inhalation of dust particles, which can also contain hazardous substances from the fire absorbed on the alumina particles. May emit poisonous fumes. May emit corrosive fumes.
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	 Clean up waste regularly and abnormal spills immediately. Avoid breathing dust and contact with skin and eyes. Wear protective clothing, gloves, safety glasses and dust respirator. Use dry clean up procedures and avoid generating dust.
Major Spills	 Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by all means available, spillage from entering drains or water courses.

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

SECTION 7 Handling and storage

Precautions for safe handling

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

Conditions for safe storage, including any incompatibilities

Suitable container	 Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	 Avoid strong acids, bases. Avoid contact with copper, aluminium and their alloys.

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SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

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

Emergency Limits

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
graded sand	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m3	33 mg/m3	200 mg/m3
calcium carbonate	Carbonic acid, calcium salt	45 mg/m3	210 mg/m3	1,300 mg/m3
silica crystalline - quartz	Silica, crystalline-quartz; (Silicon dioxide)	0.075 mg/m3	33 mg/m3	200 mg/m3
potassium sodium tartrate	Sodium potassium tartrate; (Potassium sodium tartrate)	9 mg/m3	99 mg/m3	590 mg/m3
potassium sodium tartrate	Sodium potassium tartrate tetrahydrate	9 mg/m3	99 mg/m3	590 mg/m3
lithium carbonate	Lithium carbonate	3.1 mg/m3	34 mg/m3	210 mg/m3

Ingredient	Original IDLH	Revised IDLH
graded sand	25 mg/m3 / 50 mg/m3	Not Available
portland cement	5,000 mg/m3	Not Available
calcium carbonate	Not Available	Not Available
calcium sulfate	Not Available	Not Available
calcium aluminate cement	Not Available	Not Available
silica crystalline - quartz	25 mg/m3 / 50 mg/m3	Not Available
potassium sodium tartrate	Not Available	Not Available
lithium carbonate	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
calcium aluminate cement	Е	≤ 0.01 mg/m³
potassium sodium tartrate	Е	≤ 0.01 mg/m³
lithium carbonate	E	≤ 0.01 mg/m³

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.

Personal protection











Eye and face protection

- Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.
- Chemical goggles.whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.
- Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.
- Alternatively a gas mask may replace splash goggles and face shields.

Skin protection

See Hand protection below

Elbow length PVC gloves

Hands/feet protection

NOTE:

The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

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Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

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.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene.nitrile rubber.
- butyl rubber.

Body protection

See Other protection below

Employees working with confirmed human carcinogens should be provided with, and be required to wear, clean, full body protective clothing (smocks, coveralls, or long-sleeved shirt and pants), shoe covers and gloves prior to entering the regulated area. [AS/NZS ISO 6529:2006 or national equivalent]

- Employees engaged in handling operations involving carcinogens should be provided with, and required to wear and use half-face filter-type respirators with filters for dusts, mists and fumes, or air purifying canisters or cartridges. A respirator affording higher levels of protection may be substituted. [AS/NZS 1715 or national equivalent]
- Emergency deluge showers and eyewash fountains, supplied with potable water, should be located near, within sight of, and on the same level with locations where direct exposure is likely.

Other protection

- Prior to each exit from an area containing confirmed human carcinogens, employees should be required to remove and leave protective clothing and equipment at the point of exit and at the last exit of the day, to place used clothing and equipment in impervious containers at the point of exit for purposes of decontamination or disposal. The contents of such impervious containers must be identified with suitable labels. For maintenance and decontamination activities, authorized employees entering the area should be provided with and required to wear clean, impervious garments, including gloves, boots and continuous-air supplied hood.
- Prior to removing protective garments the employee should undergo decontamination and be required to shower upon removal of the garments and hood.
- Overalls.
- P.V.C apron
- Barrier cream.
- Skin cleansing cream.

Respiratory protection

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

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

* - Negative pressure demand ** - Continuous flow

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

- ▶ Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne
- ► Try to avoid creating dust conditions.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties Powder; insoluble in water **Appearance** Physical state Divided Solid Relative density (Water = 1) Not Available Partition coefficient n-octanol Odour Not Available Not Available / water Odour threshold Not Available Auto-ignition temperature (°C) Not Available Not Available pH (as supplied) Not Applicable Decomposition temperature Melting point / freezing point Not Available Viscosity (cSt) Not Applicable (°C) Initial boiling point and boiling Not Applicable Molecular weight (g/mol) Not Applicable range (°C) Flash point (°C) Not Applicable Not Available **Evaporation rate** Not Applicable **Explosive properties** Not Available Not Available Flammability Not Applicable Oxidising properties

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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	Immiscible	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	 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

The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.

Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual. Levels above 10 micrograms per cubic metre of suspended inorganic sulfates in the air may cause an excess risk of asthmatic attacks in

Inhaled

Skin Contact

Chronic

Inhalation may result in ulcers or sores of the lining of the nose (nasal mucosa), and lung damage.

Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result

Effects on lungs are significantly enhanced in the presence of respirable particles.

Ingestion Accidental ingestion of the material may be damaging to the health of the individual.

The material may accentuate any pre-existing dermatitis condition

Four students received severe hand burns whilst making moulds of their hands with dental plaster substituted for Plaster of Paris. The dental plaster known as "Stone" was a special form of calcium sulfate hemihydrate containing alpha-hemihydrate crystals that provide high compression strength to the moulds. Beta-hemihydrate (normal Plaster of Paris) does not cause skin burns in similar circumstances.

Handling wet cement can cause dermatitis. Cement when wet is quite alkaline and this alkali action on the skin contributes strongly to cement contact dermatitis since it may cause drying and defatting of the skin which is followed by hardening, cracking, lesions developing, possible infections of lesions and penetration by soluble salts.

cancer are significantly related.

Skin contact may result in severe irritation particularly to broken skin. Ulceration known as "chrome ulcers" may develop. Chrome ulcers and skin 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.

The material may cause moderate inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.

If applied to the eyes, this material causes severe eye damage.

Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population

There is sufficient evidence to suggest that this material directly causes cancer in humans.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Animal testing shows long term exposure to aluminium oxides may cause lung disease and cancer, depending on the size of the particle. The smaller the size, the greater the tendencies of causing harm.

Red blood cells and rabbit alveolar macrophages exposed to calcium silicate insulation materials in vitro showed haemolysis in one study but not in another. Both studies showed the substance to be more cytotoxic than titanium dioxide but less toxic than asbestos.

In a small cohort mortality study of workers in a wollastonite guarry, the observed number of deaths from all cancers combined and lung cancer were lower than expected. Wollastonite is a calcium inosilicate mineral (CaSiO3).

Amorphous silicas generally are less hazardous than crystalline silicas, but the former can be converted to the latter on heating and subsequent cooling. Inhalation of dusts containing crystalline silicas may lead to silicosis, a disabling lung disease that may take years to develop. Cement contact dermatitis (CCD) may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is due to soluble chromates (chromate compounds) present in trace amounts in some cements and cement products. Soluble chromates readily penetrate intact skin. Cement dermatitis can be characterised by fissures, eczematous rash, dystrophic nails, and dry skin; acute contact with highly alkaline mixtures may cause localised necrosis.

Soluble silicates do not exhibit sensitizing potential. Testing in bacterial and animal experiments have not shown any evidence of them causing mutations or birth defects.

Pure calcium carbonate does not cause the disease pneumoconiosis probably due to its rapid elimination from the body. However, its unsterilised particulates can infect the lung and airway to cause inflammation.

Overexposure to the breathable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity and chest infections. Repeated exposures in the workplace to high levels of fine-divided dusts may produce a condition known as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50000 inch) are present.

Chronic excessive intake of iron have been associated with damage to the liver and pancreas. People with a genetic disposition to poor control over iron are at an increased risk.

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Chromium (III) is an essential trace mineral. Chronic exposure to chromium (III) irritates the airways, malnourishes the liver and kidneys, causes fluid in the lungs, and adverse effects on white blood cells, and also increases the risk of developing lung cancer.

Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

	Prolonged of repeated skin contact may cause drying with	cracking, initiation and possible defination following.
	TOXICITY	IRRITATION
ARDEX K900 BF	Not Available	Not Available
	1007 (Gallasis	Titor managed
	TOXICITY	IRRITATION
areded cond	0.3 mg/kg ^[2]	Not Available
graded sand	50 mg/kg ^[2]	
	Oral (rat) LD50: =500 mg/kg ^[2]	
	TOXICITY	IRRITATION
portland cement	Not Available	Not Available
	Not Available	Not Available
	TOXICITY	IRRITATION
	Oral (rat) LD50: 6450 mg/kg ^[2]	Eye (rabbit): 0.75 mg/24h - SEVERE
calcium carbonate		Eye: no adverse effect observed (not irritating) ^[1]
		Skin (rabbit): 500 mg/24h-moderate
		Skin: no adverse effect observed (not irritating) $^{[1]}$
	TOVIOLTY	IDDITATION
	TOXICITY Oral (2000) DEC. 4050, 4000 2004, 122	IRRITATION Not Available
	Oral (mouse) LD50: =4052-4226 mg/kg ^[2]	Not Available
calcium sulfate	Oral (rat) LD50: >10000 mg/kg ^[2]	
	Oral (rat) LD50: >3000 mg/kg ^[2]	
	Oral (rat) LD50: >5000 mg/kg ^[2]	
	TOXICITY	IRRITATION
calcium aluminate cement	Not Available	Not Available
	TOXICITY	IRRITATION
silica crystalline - quartz	0.3 mg/kg ^[2]	Not Available
	50 mg/kg ^[2]	
	Oral (rat) LD50: =500 mg/kg ^[2]	
	TOXICITY	IRRITATION
	~1000 mg/kg ^[2]	Not Available
	~200 mg/kg ^[2]	
	~400 mg/kg ^[2]	
	~400 mg/kg ^[2]	
	~450 mg/kg ^[2]	
	~500 mg/kg ^[2]	
	>=1200<=1500 mg/kg ^[2]	
	>400<1000 mg/kg ^[2]	
potassium sodium tartrate	>424<600 mg/kg ^[2]	
	1200 mg/kg ^[2]	
	1500 mg/kg ^[2]	
	2240 mg/kg ^[2]	
	2240 mg/kg ^[2]	
	300 mg/kg ^[2]	
	400 mg/kg ^[2]	
	4200 mg/kg ^[2]	
	TOXICITY	IRRITATION
	=250 mg/kg ^[2]	Eye (rabbit) : Moderate *
	=867 mg/kg ^[2]	Skin (rabbit) : Mild *
lithium carbonate	120 mg/kg ^[2]	
	8 mg/kg ^[2]	
	Inhalation (rat) LC50: >0.8 mg/l/4h* ^[2]	

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Oral (rat) LD50: >2000 mg/kg^[2]

Oral (rat) LD50: 525 mg/kg^[2]

Leaend:

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.

CALCIUM CARBONATE

No evidence of carcinogenic properties. No evidence of mutagenic or teratogenic effects.

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

CALCIUM SULFATE

Gypsum (calcium sulfate dehydrate) irritates the skin, eye, mucous membranes, and airways. A series of studies involving Gypsum industry workers in Poland reported chronic, non-specific airways diseases.

WARNING: For inhalation exposure ONLY: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS

Repeat dose toxicity: Examination of workers at a gypsum manufacturing plant found restrictive defects on long-function tests in those who were chronically exposed to gypsum dust.

Synergistic/antagonistic effects: Gypsum appears to be protective on quartz toxicity in animal testing.

SILICA CRYSTALLINE -

QUARTZ

The International Agency for Research on Cancer (IARC) has classified occupational exposures to **respirable** (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease

Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.

* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).

NOTE: the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.

Goitrogenic

Goitrogens are substances that suppress the function of the thyroid gland by interfering with iodine uptake, which can, as a result, cause an enlargement of the thyroid (a goitre).

Goitrogens include

- Vitexin, a flavonoid, which inhibits thyroid peroxidase, contributing to goitre
- Thiocyanate and perchlorate, which decrease iodide uptake by competitive inhibition and consequently increase release of TSH from the pituitary gland
- Lithium, which inhibits thyroid hormone release
- Certain foods, such as soy and millet (containing vitexins) and vegetables in the genus Brassica (which includes broccoli, Brussels sprouts, cabbage, cauliflower and horseradish).
- Caffeine (found in coffee, tea, cola and chocolate), which acts on thyroid function as a suppressant.

Lacrimation, altered sleep times, hallucinations, distorted perception, toxic psychosis, excitement, ataxia, respiratory depression, allergic dermatitis (after sytemic administration), foetoxicity and foetolethality and specific development abnormalities recorded. Non-sensitising guinea pig * * FMC SDS

GRADED SAND & PORTLAND CEMENT & CALCIUM ALUMINATE CEMENT & POTASSIUM SODIUM TARTRATE

LITHIUM CARBONATE

No significant acute toxicological data identified in literature search.

PORTLAND CEMENT &
CALCIUM CARBONATE &
CALCIUM SULFATE &
CALCIUM ALUMINATE
CEMENT & LITHIUM
CARBONATE

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.

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
ARDEX K900 BF	Not Available	Not Available	Not Available	Not Available	Not Available

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	Endpoint	Test Duration (hr)	Species	Value	Source
graded sand	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
portland cement	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72	Algae or other aquatic plants	>14mg/L	2
calcium carbonate	EC10	72	Algae or other aquatic plants	>14mg/L	2
	NOEC	72	Algae or other aquatic plants	14mg/L	2
	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	>1-970mg/L	2
calcium sulfate	EC50	72	Algae or other aquatic plants	>79mg/L	2
	EC98	720	Algae or other aquatic plants	=1872.000mg/L	1
	NOEC	24	Crustacea	<2500.0mg/L	1
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96	Fish	>100mg/L	2
calcium aluminate cement	EC50	48	Crustacea	5.4mg/L	2
	EC50	72	Algae or other aquatic plants	3.6mg/L	2
	NOEC	72	Algae or other aquatic plants	2.6mg/L	2
	Endpoint	Test Duration (hr)	Species	Value	Source
silica crystalline - quartz	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96	Fish	1-mg/L	2
potassium sodium tartrate	EC50	72	Algae or other aquatic plants	Algae or other aquatic plants 41mg/L	
	NOEC	504	Crustacea	95.2mg/L	2
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96	Fish	5.69mg/L	2
lithium carbonate	EC50	48	Crustacea	6.24mg/L	2
	EC50	72	Algae or other aquatic plants	>400mg/L	2
	NOEC	504	Crustacea	1.7mg/L	2
Legend:	V3.12 (QSAR) - Aquatic Toxicity Data (Estimated)	ECHA Registered Substances - Ecotoxicological Infor 4. US EPA, Ecotox database - Aquatic Toxicity Data & IETI (Japan) - Bioconcentration Data 8. Vendor Data		

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air	
calcium sulfate	HIGH	HIGH	
lithium carbonate	LOW	LOW	

Bioaccumulative potential

Ingredient	Bioaccumulation
calcium sulfate	LOW (LogKOW = -2.2002)
lithium carbonate	LOW (LogKOW = -0.4605)

Mobility in soil

Ingredient	Mobility
calcium sulfate	LOW (KOC = 6.124)
lithium carbonate	HIGH (KOC = 1)

SECTION 13 Disposal considerations

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Product / Packaging disposal

- ▶ 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.

Monographs

- Where in doubt contact the responsible authority.
 - ▶ 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.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

portland cement is found on the following regulatory lists

calcium carbonate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

Australian Inventory of Industrial Chemicals (AIIC)

calcium sulfate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

calcium aluminate cement is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

silica crystalline - quartz is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC

Monographs - Group 1 : Carcinogenic to humans

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1 : Carcinogenic to humans

potassium sodium tartrate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

lithium carbonate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

National Inventory Status

National Inventory	Status
Australia - AIIC	Yes
Australia - Non-Industrial Use	No (graded sand; portland cement; calcium carbonate; calcium sulfate; calcium aluminate cement; silica crystalline - quartz; potassium sodium tartrate; lithium carbonate)
Canada - DSL	Yes
Canada - NDSL	No (graded sand; portland cement; calcium sulfate; calcium aluminate cement; silica crystalline - quartz; potassium sodium tartrate; lithium carbonate)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (portland cement)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (portland cement; calcium aluminate cement)
USA - TSCA	Yes
Taiwan - TCSI	Yes

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National Inventory	Status
Mexico - INSQ	No (calcium aluminate cement; potassium sodium tartrate)
Vietnam - NCI	Yes
Russia - ARIPS	No (calcium aluminate cement)
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	24/09/2020
Initial Date	24/09/2020

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

 ${\sf PC-TWA: Permissible \ Concentration-Time \ Weighted \ Average}$

 ${\sf PC-STEL} : {\sf Permissible\ Concentration-Short\ Term\ Exposure\ Limit}$

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit $_{\circ}$

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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TEL (+61 3) 9572 4700.

