



## Davco Lanko 135

Parex Group (ParexGroup)

Chemwatch: 4772-88

Version No: 5.1.1.1

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

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S.GHS.AUS.EN

### SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

#### Product Identifier

Product name	Davco Lanko 135
Synonyms	Not Available
Other means of identification	Not Available

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

Relevant identified uses	Use according to manufacturer's directions.
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#### Details of the supplier of the safety data sheet

Registered company name	Parex Group (ParexGroup)
Address	67 Elizabeth Street Wetherill Park NSW 2164 Australia
Telephone	+61 2 9616 3000
Fax	+61 2 9725 5551
Website	www.davco.com.au
Email	marketing@davco.com.au

#### Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	1800 039 008
Other emergency telephone numbers	Not Available

#### CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
1800 039 008	1800 039 008	+612 9186 1132

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

### SECTION 2 HAZARDS IDENTIFICATION

#### Classification of the substance or mixture

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 1 = Low
Body Contact	3	2 = Moderate
Reactivity	0	3 = High
Chronic	2	4 = Extreme

Poisons Schedule Not Applicable

Classification [1] Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Acute Aquatic Hazard Category 3, Chronic Aquatic Hazard Category 3

Legend: 1. Classified by Chemwatch, 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

#### Label elements

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GHS label elements



SIGNAL WORD DANGER

Hazard statement(s)

- H315 Causes skin irritation.
- H318 Causes serious eye damage.
- H317 May cause an allergic skin reaction.
- H335 May cause respiratory irritation.
- H412 Harmful to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

- P271 Use only outdoors or in a well-ventilated area.
- P280 Wear protective gloves/protective clothing/eye protection/face protection.
- P261 Avoid breathing dust/fumes.
- P273 Avoid release to the environment.
- P272 Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

- P305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
- P310 Immediately call a POISON CENTER or doctor/physician.
- P362 Take off contaminated clothing and wash before reuse.
- P363 Wash contaminated clothing before reuse.
- P302+P352 IF ON SKIN: Wash with plenty of soap and water.
- P333+P313 If skin irritation or rash occurs: Get medical advice/attention.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

- P501 Dispose of contents/container in accordance with local regulations.

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
68997-16-2	35-40	<u>calcium aluminat cement</u>
471-34-1	10-15	<u>calcium carbonate</u>
65997-15-1	10-15	<u>portland cement</u>
Not Available	10-15	binder
7778-18-9	10-15	<u>calcium sulfate</u>
Not Available	5-10	filler extender
12199-37-0	5-9	<u>magnesium aluminosilicate (smectite)</u>
14808-60-7.	0.5-1.1	<u>graded sand</u>

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.

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<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
<b>Inhalation</b>	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ 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.</li> <li>▶ Transport to hospital, or doctor.</li> </ul>
<b>Ingestion</b>	<ul style="list-style-type: none"> <li>▶ If swallowed do NOT induce vomiting.</li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Seek medical advice.</li> </ul>

**Indication of any immediate medical attention and special treatment needed**

Treat symptomatically.

**SECTION 5 FIREFIGHTING MEASURES**

**Extinguishing media**

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

**Special hazards arising from the substrate or mixture**

**Fire Incompatibility** None known.

**Advice for firefighters**

<b>Fire Fighting</b>	<ul style="list-style-type: none"> <li>▶ When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles.</li> <li>▶ When heated to extreme temperatures, (&gt;1700 deg.C) amorphous silica can fuse.</li> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water courses.</li> <li>▶ Use fire fighting procedures suitable for surrounding area.</li> <li>▶ DO NOT approach containers suspected to be hot.</li> <li>▶ Cool fire exposed containers with water spray from a protected location.</li> </ul>
<b>Fire/Explosion Hazard</b>	<p>Non combustible.</p> <p>Not considered a significant fire risk, however containers may burn.</p> <p>Decomposition may produce toxic fumes of; sulfur oxides (SOx) silicon dioxide (SiO2)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.</p>

**SECTION 6 ACCIDENTAL RELEASE MEASURES**

**Personal precautions, protective equipment and emergency procedures**

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Remove all ignition sources.</li> <li>▶ Clean up all spills immediately.</li> <li>▶ Avoid contact with skin and eyes.</li> <li>▶ Control personal contact with the substance, by using protective equipment.</li> <li>▶ Use dry clean up procedures and avoid generating dust.</li> <li>▶ Place in a suitable, labelled container for waste disposal.</li> </ul>
<b>Major Spills</b>	<p>Moderate hazard.</p> <ul style="list-style-type: none"> <li>▶ CAUTION Advise personnel in area.</li> <li>▶ Alert Emergency Services and tell them location and nature of hazard.</li> <li>▶ Control personal contact by wearing protective clothing.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water courses.</li> <li>▶ Recover product wherever possible.</li> </ul>

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

**SECTION 7 HANDLING AND STORAGE**

**Precautions for safe handling**

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ Prevent concentration in hollows and sumps.</li> <li>▶ DO NOT enter confined spaces until atmosphere has been checked.</li> <li>▶ DO NOT allow material to contact humans, exposed food or food utensils.</li> </ul>
<b>Other information</b>	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ Store in a cool, dry area protected from environmental extremes.</li> <li>▶ Store away from incompatible materials and foodstuff containers.</li> <li>▶ Protect containers against physical damage and check regularly for leaks.</li> </ul>

- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

**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, acid chlorides, acid anhydrides and chloroformates.
- ▶ Avoid contact with copper, aluminium and their alloys.

**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	calcium carbonate	Calcium carbonate	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	portland cement	Portland cement	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	calcium sulfate	Calcium sulphate	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	graded sand	Silica - Crystalline: Quartz (respirable dust) / Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available

**EMERGENCY LIMITS**

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
calcium carbonate	Limestone; (Calcium carbonate; Dolomite)	27 mg/m3	27 mg/m3	1300 mg/m3
calcium carbonate	Carbonic acid, calcium salt	45 mg/m3	210 mg/m3	1300 mg/m3
calcium sulfate	Calcium(II) sulfate dihydrate (1:1:2)	10 mg/m3	10 mg/m3	21 mg/m3
calcium sulfate	Calcium sulfate anhydrous; (Drierite; Gypsum; Plaster of Paris)	30 mg/m3	330 mg/m3	2000 mg/m3
graded sand	Silica, crystalline-quartz; (Silicon dioxide)	0.025 mg/m3	0.025 mg/m3	0.025 mg/m3

Ingredient	Original IDLH	Revised IDLH
calcium aluminate cement	Not Available	Not Available
calcium carbonate	Not Available	Not Available
portland cement	N.E. mg/m3 / N.E. ppm	5,000 mg/m3
binder	Not Available	Not Available
calcium sulfate	Not Available	Not Available
filler extender	Not Available	Not Available
magnesium aluminosilicate (smeclite)	Not Available	Not Available
graded sand	N.E. mg/m3 / N.E. ppm	50 mg/m3

**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.

**Personal protection**



**Eye and face protection**

- ▶ Chemical goggles.
- ▶ 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.

**Skin protection**

See Hand protection below

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

**Hands/feet protection**

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

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choice.

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.

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.
- ▶ fluorocautchouc.
- ▶ polyvinyl chloride.

**Body protection**

See Other protection below

**Other protection**

- ▶ Overalls.
- ▶ P.V.C. apron.
- ▶ Barrier cream.
- ▶ Skin cleansing cream.
- ▶ Eye wash unit.

**Thermal hazards**

Not Available

**Respiratory protection**

Particulate. (AS/NZS 1716 & 1715, EN 143:000 & 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)

If inhalation risk above the TLV exists, wear approved dust respirator.

Use respirators with protection factors appropriate for the exposure level.

- ▶ Up to 5 X TLV, use valveless mask type; up to 10 X TLV, use 1/2 mask dust respirator
- ▶ Up to 50 X TLV, use full face dust respirator or demand type C air supplied respirator
- ▶ Up to 500 X TLV, use powered air-purifying dust respirator or a Type C pressure demand supplied-air respirator
- ▶ Over 500 X TLV wear full-face self-contained breathing apparatus with positive pressure mode or a combination respirator with a Type C positive pressure supplied-air full-face respirator and an auxiliary self-contained breathing apparatus operated in pressure demand or other positive pressure mode
- ▶ 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**

<b>Appearance</b>	Grey powder with a characteristic odour; not miscible with water.		
<b>Physical state</b>	Divided Solid	<b>Relative density (Water = 1)</b>	>1
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Applicable	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Applicable	<b>Viscosity (cSt)</b>	Not Applicable
<b>Initial boiling point and boiling range (°C)</b>	Not Applicable	<b>Molecular weight (g/mol)</b>	Not Applicable
<b>Flash point (°C)</b>	Not Applicable	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Applicable	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Applicable	<b>Oxidising properties</b>	Not Available

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<b>Upper Explosive Limit (%)</b>	Not Available	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Applicable
<b>Lower Explosive Limit (%)</b>	Not Available	<b>Volatile Component (%vol)</b>	VOC = 11 g/l (SCAQMD Method 304-91)
<b>Vapour pressure (kPa)</b>	Not Available	<b>Gas group</b>	Not Available
<b>Solubility in water (g/L)</b>	Immiscible	<b>pH as a solution (1%)</b>	Not Available
<b>Vapour density (Air = 1)</b>	Not Available	<b>VOC g/L</b>	Not Available

**SECTION 10 STABILITY AND REACTIVITY**

<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
<b>Possibility of hazardous reactions</b>	See section 7
<b>Conditions to avoid</b>	See section 7
<b>Incompatible materials</b>	See section 7
<b>Hazardous decomposition products</b>	See section 5

**SECTION 11 TOXICOLOGICAL INFORMATION**

**Information on toxicological effects**

<b>Inhaled</b>	<p>Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual. 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.</p> <p>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 in excessive exposures.</p>
<b>Ingestion</b>	<p>Effects on lungs are significantly enhanced in the presence of respirable particles. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.</p> <p>Accidental ingestion of the material may be damaging to the health of the individual. Not normally a hazard due to the physical form of product. The material is a physical irritant to the gastro-intestinal tract</p>
<b>Skin Contact</b>	<p>This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition</p> <p>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.</p> <p>Skin contact may result in severe irritation particularly to broken skin. Ulceration known as "chrome ulcers" may develop. Chrome ulcers and skin cancer are significantly related.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p>
<b>Eye</b>	<p>If applied to the eyes, this material causes severe eye damage.</p>
<b>Chronic</b>	<p>Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.</p> <p>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.</p> <p>Cement eczema may be due to chromium in feed stocks or contamination from materials of construction used in processing the cement. Sensitisation to chromium may be the leading cause of nickel and cobalt sensitivity and the high alkalinity of cement is an important factor in cement dermatoses [LO]. Overexposure to respirable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity, chest infections</p> <p>Repeated exposures, in an occupational setting, 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 (1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion (exertional dyspnea), increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucous, vital capacity decreases further and shortness of breath becomes more severe.</p> <p>There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.</p>

<b>Davco Lanko 135</b>	<b>TOXICITY</b> Not Available	<b>IRRITATION</b> Not Available
<b>calcium aluminat cement</b>	<b>TOXICITY</b> Not Available	<b>IRRITATION</b> Not Available
<b>calcium carbonate</b>	<b>TOXICITY</b> dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup> Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>	<b>IRRITATION</b> Eye (rabbit): 0.75 mg/24h - SEVERE Skin (rabbit): 500 mg/24h-moderate

portland cement	TOXICITY	IRRITATION
	Not Available	Not Available
calcium sulfate	TOXICITY	IRRITATION
	Oral (rat) LD50: >1581 mg/kg <sup>[1]</sup>	Not Available
magnesium aluminosilicate (smectite)	TOXICITY	IRRITATION
	Oral (rat) LD50: >16000 mg/kg <sup>[2]</sup>	Nil reported
graded sand	TOXICITY	IRRITATION
	Not Available	Not Available

**Legend:** 1 Value obtained from Europe ECHA Registered Substances - Acute toxicity 2 \* Value obtained from manufacturer's SDS Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

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CALCIUM ALUMINATE CEMENT	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases.</p> <p>No data of toxicological significance identified in literature search.</p>
CALCIUM CARBONATE	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases.</p> <p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>The material may 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.</p> <p>No evidence of carcinogenic properties. No evidence of mutagenic or teratogenic effects.</p> <p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact.</p>
PORTLAND CEMENT	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases.</p> <p>No significant acute toxicological data identified in literature search.</p>
CALCIUM SULFATE	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases.</p> <p>Gypsum (calcium sulfate dihydrate) is a skin, eye, mucous membrane, and respiratory system irritant. Early studies of gypsum miners did not relate pneumoconiosis with chronic exposure to gypsum. Other studies in humans (as well as animals) showed no lung fibrosis produced by natural dusts of calcium sulfate except in the presence of silica. However, a series of studies reported chronic nonspecific respiratory diseases in gypsum industry workers in Gacki, Poland.</p> <p>Unlike other fibers, gypsum is very soluble in the body; its half-life in the lungs has been estimated as minutes. In four healthy men receiving calcium</p>

**Davco Lanko 135**

supplementation with calcium sulfate (CaSO4-1/2H2O) (200 or 220 mg) for 22 days, an average absorption of 28.3% was reported.  
No significant acute toxicological data identified in literature search.

<b>GRADED SAND</b>
Acute Toxicity
Skin Irritation/Corrosion
Serious Eye Damage/Irritation
Respiratory or Skin sensitisation
Mutagenicity



Carcinogenicity
Reproductivity
STOT - Single Exposure
STOT - Repeated Exposure
Aspiration Hazard



**Legend:**  
 ✕ - Data available but does not fill the criteria for classification  
 ✓ - Data required to make classification available  
 ○ - Data Not Available to make classification

**SECTION 12 ECOLOGICAL INFORMATION**

**Toxicity**

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
calcium aluminate cement	LC50	96	Fish	>100mg/L	2
calcium aluminate cement	EC50	24	Crustacea	6.4mg/L	2
calcium aluminate cement	EC50	48	Crustacea	5.4mg/L	2
calcium aluminate cement	EC50	72	Algae or other aquatic plants	3.6mg/L	2
calcium aluminate cement	NOEC	72	Algae or other aquatic plants	2.6mg/L	2
calcium carbonate	LC50	96	Fish	>56000mg/L	4
calcium carbonate	EC50	72	Algae or other aquatic plants	>14mg/L	2
calcium carbonate	NOEC	72	Algae or other aquatic plants	14mg/L	2
calcium sulfate	EC50	96	Algae or other aquatic plants	105.72278mg/L	3
calcium sulfate	NOEC	504	Crustacea	360mg/L	4
calcium sulfate	LC50	96	Fish	>79mg/L	2
calcium sulfate	EC50	72	Algae or other aquatic plants	>79mg/L	2

**Legend:**

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

Bentonite and kaolin have low toxicity to aquatic species, a large number of which have been tested  
For Inorganic Sulfate:

Environmental Fate - Sulfates can produce a laxative effect at concentrations of 1000 - 1200 mg/liter, but no increase in diarrhea, dehydration or weight loss. The presence of sulfate in drinking-water can also result in a noticeable taste. Sulfate may also contribute to the corrosion of distribution systems. No health-based guideline value for sulfate in drinking water is proposed.  
Atmospheric Fate: Sulfates are removed from the air by both dry and wet deposition processes. Wet deposition processes including rain-out (a process that occurs within the clouds) and washout (removal by precipitation below the clouds) which contribute to the removal of sulfate from the atmosphere.

**For Silica:**

Environmental Fate: Most documentation on the fate of silica in the environment concerns dissolved silica, in the aquatic environment, regardless of origin, (man-made or natural), or structure, (crystalline or amorphous).  
Terrestrial Fate: Silicon makes up 25.7% of the Earth's crust, by weight, and is the second most abundant element, being exceeded only by oxygen. Silicon is not found free in nature, but occurs chiefly as the oxide and as silicates. Once released into the environment, no distinction can be made between the initial forms of silica.  
Aquatic Fate: At normal environmental pH, dissolved silica exists exclusively as monosilicic acid. At pH 9.4, amorphous silica is highly soluble in water.  
DO NOT discharge into sewer or waterways.

**Persistence and degradability**

Ingredient	Persistence: Water/Soil	Persistence: Air
calcium sulfate	HIGH	HIGH

**Bioaccumulative potential**

Ingredient	Bioaccumulation
calcium sulfate	LOW (LogKOW = -2.2002)

**Mobility in soil**

Ingredient	Mobility
calcium sulfate	LOW (KOC = 6.124)

**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. 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 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

**CALCIUM ALUMINATE CEMENT(65997-16-2) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Inventory of Chemical Substances (AICS)

**CALCIUM CARBONATE(471-34-1) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards

Australia Inventory of Chemical Substances (AICS)

**PORTLAND CEMENT(65997-15-1) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards

Australia Inventory of Chemical Substances (AICS)

**CALCIUM SULFATE(7778-18-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards

Australia Inventory of Chemical Substances (AICS)

**MAGNESIUM ALUMINOSILICATE (SMECTITE)(12199-37-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Inventory of Chemical Substances (AICS)

**GRADED SAND(14808-60-7.) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards

Australia Hazardous Substances Information System - Consolidated Lists

Australia Inventory of Chemical Substances (AICS)

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

National Inventory	Status
Australia - AICS	Y
Canada - DSL	N (magnesium aluminosilicate (smectite))
Canada - NDSL	N (portland cement; calcium sulfate; calcium aluminate cement; graded sand)
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	N (portland cement)
Korea - KECL	Y
New Zealand - NZIoC	Y
Philippines - PICCS	N (portland cement; calcium aluminate cement)
USA - TSCA	Y

Legend:

Y = All ingredients are on the inventory

N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

## SECTION 16 OTHER INFORMATION

### Other information

#### Ingredients with multiple cas numbers

Name	CAS No
calcium aluminate cement	65997-16-2, 12042-68-1

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**Davco Lanko 135**

calcium carbonate 471-34-1, 13397-26-7, 15634-14-7, 1317-65-3, 72608-12-9, 878759-26-3, 63660-97-9, 459411-10-0, 198352-33-9, 146358-95-4  
calcium sulfate 7778-18-9, 10101-41-4

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.

A list of reference resources used to assist the committee may be found at:

[www.chemwatch.net](http://www.chemwatch.net)

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

**Definitions and abbreviations**

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

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