

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

1.1. Product Identifier

Product name	MP014025
Synonyms	MP014025
Other means of identification	Silicone Heat Transfer Compound

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

Relevant identified uses	heat transfer compound
Uses advised against	Not Applicable

1.3. Details of the supplier of the safety data sheet

Registered company name	Premier Farnell plc
Address	150 Armley Road, Leeds, LS12 2QQ
Telephone	+44 (0) 8701 202530
Fax	
Website	-

1.4. Emergency telephone number

Association / Organisation	Premier Farnell plc
Emergency telephone numbers	+44 1865 407333
Other emergency telephone numbers	-

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567 [1]	H410 - Hazardous to the Aquatic Environment Long-Term Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567

2.2. Label elements

Hazard pictogram(s)



Signal word Warning

Hazard statement(s)

H410 Very toxic to aquatic life with long lasting effects.

Supplementary statement(s)

Not Applicable

Precautionary statement(s) Prevention

P273 Avoid release to the environment.





Precautionary statement(s) Response

P391 Collect spillage.

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

2.3. Other hazards

Inhalation may produce health damage*.

Cumulative effects may result following exposure*.

May produce discomfort of the eyes, respiratory tract and skin*.

Limited evidence of a carcinogenic effect*.

REACh - Art.57-59: The mixture does not contain Substances of Very High Concern (SVHC) at the SDS print date.

SECTION 3 Composition / information on ingredients

3.1.Substances

See 'Composition on ingredients' in Section 3.2

3.2.Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classified according to GB-CLP Regulation, UK SI 2019/720 and UK SI 2020/1567	SCL / M-Factor	Nanoform Particle Characteristics
1.1314-13-2 2.215-222-5 3.030-013-00-7 4.Not Available	70	zinc oxide	Hazardous to the Aquatic Environment Acute Hazard Category 1, Hazardous to the Aquatic Environment Long-Term Hazard Category 1; H400, H410 ^[2]	Not Available	Not Available
1.112945-52-5 2.231-545-4 3.Not Available 4.Not Available	3	silica amorphous	Not Applicable	Not Available	Not Available
Legend:			. Classification drawn from GB-CLP Regulation, UK SI 2019/720 and Uk ble; [e] Substance identified as having endocrine disrupting properties	(SI 2020/1567;	3. Classification drawn

SECTION 4 First aid measures

4.1. Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: Wash out immediately with fresh running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin or hair contact occurs: Quickly but gently, wipe material off skin with a dry, clean cloth. Immediately 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.





Give a slurry of activated charcoal in water to drink. NEVER GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK.	•	Give a slurry of activated charcoal in wa	ter to drink. NEVER GIVE AN UNC	CONSCIOUS PATIENT WATER TO DRINK.
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- At least 3 tablespoons in a glass of water should be given.
- Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of emptying the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor.

NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent

Ingestion

NOTE: Wear protective gloves when inducing vomiting.

• REFER FOR MEDICAL ATTENTION WITHOUT DELAY.

- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated
- If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist.
- If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. (ICSC20305/20307)

4.3. Indication of any immediate medical attention and special treatment needed

- Absorption of zinc compounds occurs in the small intestine
- The metal is heavily protein bound.
- The usual measures for decontamination (Ipecac Syrup, lavage, charcoal or cathartics) may be administered, although patients usually have sufficient vomiting not to require
- CaNa2EDTA has been used successfully to normalise zinc levels and is the agent of choice.

[Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 Firefighting measures

5.1. Extinguishing media

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

Fire Incompatibility	None known.
.3. Advice for firefighters	
Fire Fighting	 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. When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water courses. Use water delivered as a fine spray to control fire and cool adjacent area. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire. Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	 When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed or the silica particles. When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. Combustible. Will burn if ignited. silicon dioxide (SiO2) metal oxides

SECTION 6 Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

6.2. Environmental precautions

See section 12





6.3. Methods and material for containment and cleaning up

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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. Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use). Dampen with water to prevent dusting before sweeping. Place in suitable containers for disposal. Environmental hazard - contain spillage.
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. Consider evacuation (or protect in place). No smoking, naked lights or ignition sources. Increase ventilation. Stop leak if safe to do so. Water spray or fog may be used to disperse / absorb vapour. Contain or absorb spill with sand, earth or vermiculite. Collect recoverable product into labelled containers for recycling. Collect solid residues and seal in labelled drums for disposal. Wash area and prevent runoff into drains. After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using. If contamination of drains or waterways occurs, advise emergency services.

6.4. Reference to other sections

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

SECTION 7 Handling and storage

7.1. Precautions for safe handling

7.1. Precautions for safe hand	ing
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. DO NOT enter confined spaces until atmosphere has been checked. DO NOT allow material to contact humans, exposed food or food utensils. 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.
Fire and explosion protection Other information	See section 5 Store in original containers.





7.2. 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	Derivative of electropositive metal. The substance may be or contains a 'metalloid' The following elements are considered to be metalloids; boron, silicon, germanium, arsenic, antimony, tellurium and (possibly) polonium The electronegativities and ionisation energies of the metalloids are between those of the metals and nonmetals, so the metalloids exhibit characteristics of both classes. The reactivity of the metalloids depends on the element with which they are reacting. For example, boron acts as a nonmetal when reacting with sodium yet as a metal when reacting with fluorine. Unlike most metals, most metalloids are amphoteric- that is they can act as both an acid and a base. For instance, arsenic forms not only salts such as arsenic halides, by the reaction with certain strong acid, but it also forms arsenites by reactions with strong bases. Most metalloids have a multiplicity of oxidation states or valences. For instance, tellurium has the oxidation states +2, -2, +4, and +6. Metalloids react like non-metals when they react with metals and act like metals when they react with non-metals. Zinc oxide: I slowly absorbs carbon dioxide from the air. I may react, explosively with magnesium and chlorinated rubber when heated is incompatible with linseed oil (may cause ignition) WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively. The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive. Avoid reaction with borohydrides or cyanoborohydrides Metals and their oxides or salts may react violently with chlorine trifluoride and bromine trifluoride. These trifluorides are hypergolic oxidisers. They ignite on contact (without external source of heat or ignition) with recognised fuels - contact with these materi
	 may react with fluorine, chlorates are incompatible with strong oxidisers, manganese trioxide, chlorine trioxide, strong alkalis, metal oxides, concentrated orthophosphoric acide vinyl acetate may react vigorously when heated with alkali carbonates. Avoid strong acids, bases.

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment
zinc oxide	Dermal 83 mg/kg bw/day (Systemic, Chronic) Inhalation 5 mg/m³ (Systemic, Chronic) Inhalation 0.5 mg/m³ (Local, Chronic) Dermal 83 mg/kg bw/day (Systemic, Chronic) * Inhalation 2.5 mg/m³ (Systemic, Chronic) * Oral 0.83 mg/kg bw/day (Systemic, Chronic) *	0.19 µg/L (Water (Fresh)) 1.14 µg/L (Water - Intermittent release) 1.2 µg/L (Water (Marine)) 18 mg/kg sediment dw (Sediment (Fresh Water)) 6.4 mg/kg sediment dw (Sediment (Marine)) 0.7 mg/kg soil dw (Soil) 20 µg/L (STP) 0.16 mg/kg food (Oral)
silica amorphous	Inhalation 0.3 mg/m³ (Local, Chronic)	Not Available

^{*} Values for General Population

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
European Union Directive (EU) 2017/2398 amending Directive 2004/37/EC on the protection of workers from the risks related to exposure to carcinogens or mutagens at work	silica amorphous	Not Available	0,1 mg/m3	Not Available	Not Available	(TWA (8) Respirable fraction.)





UK Workplace Exposure Limits (WELs)	silica amorphous	Silica, fused respirable dust	0.08 mg/m3	Not Available	Not Available	Not Available
UK Workplace Exposure Limits (WELs)	silica amorphous	Diatomaceous earth, natural, respirable dust	1.2 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
zinc oxide	10 mg/m3	15 mg/m3	2,500 mg/m3
silica amorphous	18 mg/m3	200 mg/m3	1,200 mg/m3
silica amorphous	18 mg/m3	100 mg/m3	630 mg/m3
silica amorphous	120 mg/m3	1,300 mg/m3	7,900 mg/m3
silica amorphous	45 mg/m3	500 mg/m3	3,000 mg/m3
silica amorphous	18 mg/m3	740 mg/m3	4,500 mg/m3

Ingredient	Original IDLH	Revised IDLH
zinc oxide	500 mg/m3	Not Available
silica amorphous	3,000 mg/m3	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit		
zinc oxide	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.			

MATERIAL DATA

for zinc oxide:

Zinc oxide intoxication (intoxication zincale) is characterised by general depression, shivering, headache, thirst, colic and diarrhoea.

Exposure to the fume may produce metal fume fever characterised by chills, muscular pain, nausea and vomiting. Short-term studies with guinea pigs show pulmonary function changes and morphologic evidence of small airway inflammation. A no-observed-adverse-effect level (NOAEL) in guinea pigs was 2.7 mg/m3 zinc oxide. Based on present data, the current TLV-TWA may be inadequate to protect exposed workers although known physiological differences in the guinea pig make it more susceptible to functional impairment of the airways than humans.

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 um (+-) 0.3 um and with a geometric standard deviation of 1.5 um (+-) 0.1 um, i.e..generally less than 5 um. For amorphous crystalline silica (precipitated silicic acid):

Amorphous crystalline silica shows little potential for producing adverse effects on the lung and exposure standards should reflect a particulate of low intrinsic toxicity. Mixtures of amorphous silicas/ diatomaceous earth and crystalline silica should be monitored as if they comprise only the crystalline forms.

The dusts from precipitated silica and silica gel produce little adverse effect on pulmonary functions and are not known to produce significant disease or toxic effect.

IARC has classified silica, amorphous as Group 3: NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

8.2. Exposure controls

8.2.1. 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.

- Employees exposed to confirmed human carcinogens should be authorized to do so by the employer, and work in a regulated area.
- Work should be undertaken in an isolated system such as a 'glove-box'. Employees should wash their hands and arms upon completion of the assigned task and before engaging in other activities not associated with the isolated system.
- Within regulated areas, the carcinogen should be stored in sealed containers, or enclosed in a closed system, including piping systems, with any sample ports or openings closed while the carcinogens are contained within.
- Open-vessel systems are prohibited.
- Each operation should be provided with continuous local exhaust ventilation so that air movement is always from ordinary work areas to the operation.
- Exhaust air should not be discharged to regulated areas, non-regulated areas or the external environment unless decontaminated. Clean make-up air should be introduced in sufficient volume to maintain correct operation of the local exhaust system.
- 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.
- Except for outdoor systems, regulated areas should be maintained under negative pressure (with respect to non-regulated areas).





,	Local exhaust ventilation requires make-up air be supplied in equal volumes to replaced air.
1	Laboratory hoods must be designed and maintained so as to draw air inward at an average linear face velocity of 0.76 m/sec with a minimur

 Laboratory hoods must be designed and maintained so as to draw air inward at an average linear face velocity of 0.76 m/sec with a minimun of 0.64 m/sec. Design and construction of the fume hood requires that insertion of any portion of the employees body, other than hands and arms. be disallowed.

8.2.2. Personal protection









Eye and face protection

Safety glasses with side shields
 Chemical goggles.

Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]

Skin protection

See Hand protection below

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

moisturing be worn or clean natios. After using gloves, nation should be wasted and direct indoughly. Application of a non-periorned moisturiser 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.
- fluorocaoutchouc
 polyvinyl chloride
- Gloves should be examined for wear and/ or degradation constantly.

Body protection

Hands/feet 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.
- 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.
- Eye wash unit.

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

Other protection

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.
- · Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- Use approved positive flow mask if significant quantities of dust becomes airborne
- · Try to avoid creating dust conditions.

Where significant concentrations of the material are likely to enter the breathing zone, a Class P3 respirator may be required.

Class P3 particulate filters are used for protection against highly toxic or highly irritant particulates

Filtration rate: Filters at least 99.95% of airborne particles

- · Relatively small particles generated by mechanical processes eq. grinding, cutting, sanding, drilling, sawing
- Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke
- · Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS
- $\cdot \ \text{Highly toxic particles e.g. Organophosphate Insecticides, Radionuclides, Asbestos}$

Note: P3 Rating can only be achieved when used with a Full Face Respirator or Powered Air-Purifying Respirator (PAPR). If used with any other respirator, it will only provide filtration protection up to a P2 rating.

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties

9.1. Information on basic physical and chemical properties			
Appearance	White paste		
Physical state	Solid	Relative density (Water = 1)	2.4





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	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	>300	Molecular weight (g/mol)	Not Available
Flash point (°C)	260	Taste	Not Available
Evaporation rate	Not Available BuAC = 1	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (Not Available%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available
Nanoform Solubility	Not Available	Nanoform Particle Characteristics	Not Available
Particle Size	Not Available		

9.2. Other information

Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2
10.2. Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
10.3. Possibility of hazardous reactions	See section 7.2
10.4. Conditions to avoid	See section 7.2
10.5. Incompatible materials	See section 7.2
10.6. Hazardous decomposition products	See section 5.3

SECTION 11 Toxicological information

11.1. Information on toxicological effects

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by inhalation.

Inhaled

Inhalation of freshly formed zinc oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in 'metal fume fever', with symptoms resembling influenza. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Leucocytosis, a transient increase





in white blood cell counts, is reported as a common finding in metal fume fever but is not known to be common amongst welders. Severe over-exposure to zinc oxide, following inhalation of fumes or finely divided dusts may result in bronchitis or pneumonia; a bluish skin tint may be

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual

Effects on lungs are significantly enhanced in the presence of respirable particles. Overexposure to respirable dust may produce wheezing, coughing and breathing difficulties leading to or symptomatic of impaired respiratory function.

Ingestion

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing.

The material has **NOT** been classified by EC Directives or other classification systems as 'harmful by ingestion'. This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

Soluble zinc salts produces irritation and corrosion of the alimentary tract (in a manner similar to copper salts) with pain, vomiting, etc. Delayed

Soluble zinc salts produces irritation and corrosion of the alimentary tract (in a manner similar to copper salts) with pain, vomiting, etc. Delayed deaths have been ascribed to inanition (weakness and extreme weight loss resulting from prolonged and severe food insufficiency) following severe strictures of the oesophagus, and pylorus. Vomiting, abdominal cramps, and diarrhea, in several cases with blood, have been observed after ingestion of zinc sulfate.

Several cases of gastrointestinal disturbances have been reported after ingestion of zinc sulfate. A significant reduction in erythrocyte superoxide dismutase activity (47% decrease), hematocrit, and serum ferritin, compared to pretreatment levels, occurred in female subjects who received supplements (as capsules) of 50 mg zinc/day as zinc gluconate for 10 weeks. A 15% decrease in erythrocyte superoxide dismutase activity was reported in male volunteers receiving 50 mg zinc/day as zinc gluconate for 6 weeks. Another study reported increases in bone specific alkaline phosphatase levels (~25%) and extracellular superoxide dismutase (~15%), while significant decreases were seen in mononuclear white cell

5'-nucleotidase (~30%) and plasma 5'-nucleotidase activity (~36%) following exposure of postmenopausal women to a combined (dietary+supplemental) 53 mg zinc/day as zinc glycine chelate. Healthy men given 200 mg zinc/day as elemental zinc for 6 weeks showed a reduction in lymphocyte stimulation response to phytohemagglutinin as well as chemotaxis and phagocytosis of bacteria by polymorphonuclear leukocytes.; however, no changes in lymphocyte cell number or in the proportion of lymphocyte populations were noted. Exposure of male volunteers to 0.48 mg zinc/kg/day, as zinc glycine chelate, had no effect on markers of coagulation relative to unexposed subjects. While the changes in

hematological end points following long-term zinc exposure in humans are noteworthy, they were subclinical in nature, and therefore, are generally considered to be non-adverse. In animals, following oral administration of zinc compounds, decreased hemoglobin, hematocrit, erythrocyte, and/or leukocyte levels were observed in rats, mice, rabbits, dogs, ferrets, and preruminant calves A number of intermediate-duration studies have demonstrated renal effects in animals exposed to zinc oxide, zinc sulfate, and zinc acetate. Zinc sulfate caused an increase in the absolute and relative kidney weights and regressive kidney lesions (not specified) in female mice that consumed 1,110 mg zinc/kg/day in the diet for 13 weeks, but no effects occurred in rats that consumed 565 mg zinc/kg/day or in mice that consumed 104 mg zinc/kg/day under similar conditions. Severe diffuse nephrosis was

observed in ferrets exposed to 195 mg zinc/kg/day as zinc oxide in the diet. In rats exposed to 191 mg zinc/kg/day as zinc acetate for 3 months, epithelial cell damage in the glomerulus and proximal convoluted tubules and increased plasma creatinine and urea levels were observed. Zinc plays a role in the normal development and maintenance of the immune system, such as in the lymphocyte response to mitogens and as a cofactor for the thymic hormone thymulin. Oral exposure to zinc at levels much higher than the recommended daily dose has impaired immune and inflammatory responses. This was observed in in vivo investigations of the immune competence of blood components taken from 11 healthy adult men after ingestion of 4.3 mg zinc/kg/day as zinc sulfate for 6 weeks. The mitogenic response elicited from peripheral blood lymphocytes and the chemotactic and phagocytic responses of polymorphonuclear leukocytes were impaired after zinc ingestion. No effects were seen on total numbers of lymphocytes or relative numbers of T cells, T cell subsets, or B cells. The relationship between these observations and decreased levels of immune competence that might lead to increased susceptibility to disease is unknown. A later study reported no effects of supplementation of male volunteers with 30 mg zinc/day (0.43 mg zinc/kg/day assuming a reference male body weight of 70 kg) as zinc glycine chelate for 14 weeks on levels of peripheral blood leucocytes or on the frequency of lymphocyte subsets.

Zinc appears to be necessary for normal brain function, but excess zinc is toxic. A 16-year-old boy who ingested .86 mg zinc/kg/day of metallic zinc over a 2-day period in an attempt to promote wound healing, developed signs and symptoms of lethargy, light-headedness, staggering, and difficulty in writing clearly. Lethargy was also observed in a 2-year-old child who ingested a zinc chloride solution (.1,000 mg zinc/kg). It is not known whether these observations represent direct effects on the nervous system. Very limited data were located regarding neurological effects in animals. Minor neuron degeneration and proliferation of oligodendroglia occurred in rats dosed with 487 mg zinc/kg/day as zinc oxide for 10 days. Rats receiving 472 mg zinc/kg/day for 10 days had increased levels of secretory material in the neurosecretory nuclei of the hypothalamus. Mice exposed postnatally to 0.5 mg zinc/kg/day as zinc acetate for 28 days showed no changes in memory formation, but showed a gradual decrease in learning extinction throughout the study.

Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by skin contact.

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.

Open cuts, abraded or irritated skin should not be exposed to this material

Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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.

Skin Contact

The material may produce mild skin irritation; limited evidence or practical experience suggests, that the material either:

Repeated or excessive handling, coupled with poor personal hygiene, may result in acne-like eruptions known as 'zinc oxide pox'

- roduces mild inflammation of the skin in a substantial number of individuals following direct contact, and/or
- produces significant, but mild, inflammation when applied to the healthy intact skin of animals (for up to four hours), such inflammation being present twenty-four hours or more after the end of the exposure period.

Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (non allergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.





Ev

Chronic

Limited evidence exists, or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals and/or is expected to produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. On the basis of epidemiological data, the material is regarded as carcinogenic to humans. There is sufficient data to establish a causal association between human exposure to the material and the development of cancer.

Exposure to the material may cause concerns for human fertility, generally on the basis that results in animal studies provide sufficient evidence to cause a strong suspicion of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects, but which are not a secondary non-specific consequence of other toxic effects.

The synthetic, amorphous silicas are believed to represent a very greatly reduced silicosis hazard compared to crystalline silicas and are considered to be nuisance dusts.

When heated to high temperature and a long time, amorphous silica can produce crystalline silica on cooling. Inhalation of dusts containing crystalline silicas may lead to silicosis, a disabling pulmonary fibrosis that may take years to develop. Discrepancies between various studies showing that fibrosis associated with chronic exposure to amorphous silica and those that do not may be explained by assuming that diatomaceous earth (a non-synthetic silica commonly used in industry) is either weakly fibrogenic or nonfibrogenic and that fibrosis is due to contamination by crystalline silica content

Repeated exposure to synthetic amorphous silicas may produce skin dryness and cracking.

Available data confirm the absence of significant toxicity by oral and dermal routes of exposure.

Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted in a number of species, at airborne concentrations ranging from 0.5 mg/m3 to 150 mg/m3. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 50 mg/m3. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m3. Differences in values may be due to particle size, and therefore the number of particles administered per unit dose. Generally, as particle size diminishes so does the NOAEL/LOAEL. Exposure produced transient increases in lung inflammation, markers of cell injury and lung collagen content. There was no evidence of interstitial pulmonary fibrosis.

Following an oral intake of extremely high doses of zinc (where 300 mg Zn/d – 20 times the US Recommended Dietary Allowance (RDA) – is a 'low intake' overdose), nausea, vomiting, pain, cramps and diarrhea may occur. There is evidence of induced copper deficiency, alterations of blood lipoprotein levels, increased levels of LDL, and decreased levels of HDL at long-term intakes of 100 mg Zn/d. The USDA RDA is 15 mg Zn/d.

There is also a condition called the 'zinc shakes' or 'zinc chills' or metal fume fever that can be induced by the inhalation of freshly formed zinc oxide formed during the welding of galvanized materials.

Supplemental zinc can prevent iron absorption, leading to iron deficiency and possible peripheral neuropathy, with loss of sensation in extremities

protocol, reproductive histories, and the nutritional status of the women. Other human studies have found no developmental effects in the newborns of mothers consuming 0.3 mg zinc/kg/day as zinc sulfate or zinc citrate or 0.06 mg zinc/kg/day as zinc aspartate during the last two trimesters. There has been a suggestion that increased serum zinc levels in pregnant women may be associated with an increase in neural tube defects, but others have failed to confirm this association. The developmental toxicity of zinc in experimental animals has been evaluated in a number of investigations. Exposure to high levels of zinc in the diet prior to and/or during gestation has been associated with increased fetal resorptions, reduced fetal weights, altered tissue concentrations of fetal iron and copper, and reduced growth in the offspring. Animal studies suggest that exposure to very high levels of dietary zinc is associated with reduced fetal weight, alopecia, decreased hematocrit, and copper deficiency in offspring. For example, second generation mice exposed to zinc carbonate during gestation and lactation (260 mg/kg/day in the maternal diet), and then continued on that diet for 8 weeks, had reduced body weight, alopecia, and signs of copper deficiency (e.g., lowered hematocrit and occasional achromotrichia [loss of hair colour]. Similarly, mink kits from dams that ingested a time-weighted-average dose of 20.8 mg zinc/kg/day as zinc sulfate also had alopecia and achromotrichia. It is likely that the alopecia resulted from zinc-induced copper deficiency, which is known to cause alopecia in monkeys. However, no adverse effects were observed in parental mice or mink. No effects on reproduction were reported in rats exposed to 50 mg zinc/kg/day.

Welding or flame cutting of metals with zinc or zinc dust coatings may result in inhalation of zinc oxide fume; high concentrations of zinc oxide fume may result in 'metal fume fever'; also known as 'brass chills', an industrial disease of short duration. [I.L.O] Symptoms include malaise, fever, weakness, nausea and may appear quickly if operations occur in enclosed or poorly ventilated areas.

Genotoxicity studies conducted in a variety of test systems have failed to provide evidence for mutagenicity of zinc. However, there are indications of weak clastogenic effects following zinc exposure.

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

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. Other signs or symptoms include altered breath sounds, diminished lung capacity, diminished oxygen uptake during exercise, emphysema and pneumothorax (air in lung cavity) as a rare complication.

Removing workers from possibility of further exposure to dust generally leads to halting the progress of the lung abnormalities. Where worker-exposure potential is high, periodic examinations with emphasis on lung dysfunctions should be undertaken

Dust inhalation over an extended number of years may produce pneumoconiosis. Pneumoconiosis is the accumulation of dusts in the lungs and the tissue reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.

860 Silicone Heat Transfer Compound

TOXICITY	IRRITATION
Not Available	Not Available





	TOXICITY	IDDITATION			
	dermal (rat) LD50: >2000 mg/kg ^[1]	IRRITATION Eye (rabbit): 500 mg/24 h - mild			
-1	***	7.0			
zinc oxide	Inhalation(Rat) LC50; >1.79 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]			
	Oral (Rat) LD50; >5000 mg/kg ^[1]	Skin (rabbit): 500 mg/24 h- mild			
		Skin: no adverse effect observed (not irritating) ^[1]			
	TOXICITY	IRRITATION			
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): non-irritating *			
silica amorphous	Inhalation(Rat) LC50; >0.139 mg/L4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]			
Silica amorphous		Skin (rabbit): non-irritating *			
		Skin: no adverse effect observed (not irritating)[1]			
Legend:	Value obtained from Europe ECHA Registered Su specified data extracted from RTECS - Register of To	ubstances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise loxic Effect of chemical Substances			
	<u> </u>				
ZINC OXIDE		d or repeated exposure and may produce a contact dermatitis (nonallergic). This form of ythema) and swelling epidermis. Histologically there may be intercellular oedema of the of the epidermis.			
SILICA AMORPHOUS	Reports indicate high/prolonged exposures to amorp effects were reversible. [PATTYS] The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or lire.				
860 Silicone Heat Transfer Compound & SILICA AMORPHOUS	drying/cracking of the skin. When experimental animals inhale synthetic amorph vast majority of SAS is excreted in the faeces and th via urine without modification in animals and humans After ingestion, there is limited accumulation of SAS	eated exposure (without personal protection) may cause mechanical irritation of the eye a nous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, tere is little accumulation in the body. Following absorption across the gut, SAS is eliminat s. SAS is not expected to be broken down (metabolised) in mammals. in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated s. SASs injected subcutaneously are subjected to rapid dissolution and removal. There is			
	indication of metabolism of SAS in animals or human soluble in physiological media and the soluble cheming both the mammalian and environmental toxicology of solubility and particle size. SAS has no acute intrinumere caused by the presence of high numbers of respersentative of exposure to commercial SASs and cause dryness and cracking, SAS is not a skin or eye	ns based on chemical structure and available data. In contrast to crystalline silica, SAS is ical species that are formed are eliminated via the urinary tract without modification. of SASs are significantly influenced by the physical and chemical properties, particularly this toxicity by inhalation. Adverse effects, including suffocation, that have been reported spirable particles generated to meet the required test atmosphere. These results are not is should not be used for human risk assessment. Though repeated exposure of the skin meet irritant, and it is not a sensitiser.			
	Repeated-dose and chronic toxicity studies confirm the absence of toxicity when SAS is swallowed or upon skin contact. Long-term inhalation of SAS caused some adverse effects in animals (increases in lung inflammation, cell injury and lung collagen content), which subsided after exposure. Numerous repeated-dose, subchronic and chronic inhalation toxicity studies have been conducted with SAS in a number of species, at airbo concentrations ranging from 0.5 mg/m3 to 150 mg/m3. Lowest-observed adverse effect levels (LOAELs) were typically in the range of 1 to 5 mg/m3. When available, the no-observed adverse effect levels (NOAELs) were between 0.5 and 10 mg/m3. The difference in values may be explained by different particle size, and therefore the number of particles administered per unit dose. In general, as particle size decreases s does the NOAEL/LOAEL.				
	assays. SAS does not impair development of the foe were not affected. For Synthetic Amorphous Silica (SAS)	oplasms (tumours). SAS is not mutagenic in vitro. No genotoxicity was detected in in vivo etus. Fertility was not specifically studied, but the reproductive organs in long-term studies			
	Inhalation (rat), 13 weeks, Lowest Observed Effect L days, LOEL = 1 mg/m3 based on reversible effects in	nent-related adverse effects at doses of up to 8% silica in the diet. evel (LOEL) =1.3 mg/m3 based on mild reversible effects in the lungs. Inhalation (rat), 90 n the lungs and effects in the nasal cavity.			
	days, LOEL = 1 mg/m3 based on reversible effects in the lungs and effects in the nasal cavity. For silane treated synthetic amorphous silica: Repeated dose toxicity: oral (rat), 28-d, diet, no significant treatment-related adverse effects at the doses tested. There is no evidence of cancer or other long-term respiratory health effects (for example, silicosis) in workers employed SAS. Respiratory symptoms in SAS workers have been shown to correlate with smoking but not with SAS exposure, w				





function values and chest radiographs are not adversely affected by long-term exposure to SAS.



Acute Toxicity	×	Carcinogenicity	×
Skin Irritation/Corrosion	×	Reproductivity	×
Serious Eye Damage/Irritation	×	STOT - Single Exposure	X
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×
Mutagenicity	×	Aspiration Hazard	×

Leaend

∠ − Data either not available or does not fill the criteria for classification
∠ − Data available to make classification

11.2.1. Endocrine Disruption Properties

Not Available

SECTION 12 Ecological information

12.1 Toxicity

860 Silicone Heat Transfer Compound	Endpoint		Test Duration (hr)		Species	Value		Source	
	Not Available Not Available			Not Available	Not Avai	lable	Not Availa	able	
	Endpoint	Test	Duration (hr)	Specie	s		Value		Source
	NOEC(ECx)	72h		Algae o	Algae or other aquatic plants		0.005mg/l		2
	BCF	1344	h	Fish			19-110		7
zinc oxide	LC50	96h		Fish			0.927-2.589mg	g/l	4
	EC50	72h		Algae o	or other aquatic plants		0.036-0.049mg	g/l	4
	EC50	48h		Crusta	cea		0.301-0.667mg/l		4
	EC50	96h		Algae o	or other aquatic plants		0.3mg/l		2
	Endpoint	Test Duration (hr)		Species			Value		Source
	EC0(ECx)	24h		Crustacea		>=10000mg/	1	1	
-111	LC50	96h		Fish		1033.016mg	/I	2	
silica amorphous	EC50	72h		Algae or other aquatic plants		14.1mg/l		2	
	EC50	48h		Crustac	Crustacea		>86mg/l		2
	EC50	96h		Algae o	Algae or other aquatic plants		217.576mg/l		2
Legend:					tered Substances - Eco				

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

Metal-containing inorganic substances generally have negligible vapour pressure and are not expected to partition to air. Once released to surface waters and moist soils their fate depends on solubility and dissociation in water. Environmental processes (such as oxidation and the presence of acids or bases) may transform insoluble metals to more soluble ionic forms. Microbiological processes may also transform insoluble metals to more soluble forms. Such ionic species may bind to dissolved ligands or sorb to solid particles in aquatic or aqueous media. A significant proportion of dissolved/ sorbed metals will end up in sediments through the settling of suspended particles. The remaining metal ions can then be taken up by aquatic organisms.

When released to dry soil most metals will exhibit limited mobility and remain in the upper layer; some will leach locally into ground water and/ or surface water ecosystems when soaked by rain or melt ice. Environmental processes may also be important in changing solubilities.

Even though many metals show few toxic effects at physiological pHs, transformation may introduce new or magnified effects.

A metal ion is considered infinitely persistent because it cannot degrade further.

The current state of science does not allow for an unambiguous interpretation of various measures of bioaccumulation.

The counter-ion may also create health and environmental concerns once isolated from the metal. Under normal physiological conditions the counter-ion may be essentially insoluble and may not be bioavailable.

Environmental processes may enhance bioavailability.

Microbial methylation plays important roles in the biogeochemical cycling of the metalloids and possibly in their detoxification. Many microorganisms (bacteria, fungi, and yeasts) and animals are now known to biomethylate arsenic, forming both volatile (e.g., methylarsines) and nonvolatile (e.g., methylarsonic acid and dimethylarsinic acid) compounds. Antimony and bismuth, also undergo biomethylation to some extent. Trimethylstibine formation by microorganisms is now well established, but this process apparently does not occur in animals. Formation of trimethylbismuth by microorganisms has been reported in a few cases.

For zinc and its compounds:





Environmental fate:

Zinc is capable of forming complexes with a variety of organic and inorganic groups (ligands). Biological activity can affect the mobility of zinc in the aquatic environment, although the biota contains relatively little zinc compared to the sediments. Zinc bioconcentrates moderately in aquatic organisms; bioconcentration is higher in crustaceans and bivalve species than in fish. Zinc does not concentrate appreciably in plants, and it does not biomagnify significantly through terrestrial food chains.

However biomagnification may be of concern if concentration of zinc exceeds 1632 ppm in the top 12 inches of soil.

Zinc can persist in water indefinitely and can be toxic to aquatic life. The threshold concentration for fish is 0.1 ppm. Zinc may be concentrated in the aquatic food chain; it is concentrated over 200,000 times in oysters. Copper is synergistic but calcium is antagonistic to zinc toxicity in fish. Zinc can accumulate in freshwater animals at 5 -1,130 times the concentration present in the water. Furthermore, although zinc actively bioaccumulates in aquatic systems, biota appears to represent a relatively minor sink compared to sediments. Steady-state zinc bioconcentration factors (BCFs) for 12 aquatic species range from 4 to 24,000. Crustaceans and fish can accumulate zinc from both water and food. A BCF of 1,000 was reported for both aquatic plants and fish, and a value of 10,000 was reported for aquatic invertebrates. The order of enrichment of zinc in different aquatic organisms was as follows (zinc concentrations in µg/g dry weight appear in parentheses): fish (25), shrimp (50), mussel (60), periphyton (260), zooplankton (330), and oyster (3,300). The high enrichment in oysters may be due to their ingestion of particulate matter containing higher concentrations of zinc than ambient water. Other investigators have also indicated that organisms associated with sediments have higher zinc concentrations than organisms living in the aqueous layer. With respect to bioconcentration from soil by terrestrial plants, invertebrates, and mammals, BCFs of 0.4, 8, and 0.6, respectively, have been reported. The concentration of zinc in plants depends on the plant species, soil pH, and the composition of the ceil.

Plant species do not concentrate zinc above the levels present in soil

In some fish, it has been observed that the level of zinc found in their bodies did not directly relate to the exposure concentrations. Bioaccumulation of zinc in fish is inversely related to the aqueous exposure. This evidence suggests that fish placed in environments with lower zinc concentrations can sequester zinc in their bodies.

The concentration of zinc in drinking water may increase as a result of the distribution system and household plumbing. Common piping materials used in distribution systems often contain zinc, as well as other metals and alloys. Trace metals may enter the water through corrosion products or simply by the dissolution of small amounts of metals with which the water comes in contact. Reactions with materials of the distribution system, particularly in soft low-pH waters, very often have produced concentrations of zinc in tap water much greater than those in the raw or treated waters at the plant of origin. Zinc gives water a metallic taste at low levels. Overexposures to zinc also have been associated with toxic effects. Ingestion of zinc or zinc-containing compounds has resulted in a variety of systemic effects in the gastrointestinal and hematological systems and alterations in the blood lipid profile in humans and animals. In addition, lesions have been observed in the liver, pancreas, and kidneys of animals.

Environmental toxicity of zinc in water is dependent upon the concentration of other minerals and the pH of the solution, which affect the ligands that associate with zinc. Zinc occurs in the environment mainly in the +2 oxidation state. Sorption is the dominant reaction, resulting in the enrichment of zinc in suspended and bed sediments. Zinc in aerobic waters is partitioned into sediments through sorption onto hydrous iron and manganese oxides, clay minerals, and organic material. The efficiency of these materials in removing zinc from solution varies according to their concentrations, pH, redox potential (Eh), salinity, nature and concentrations of complexing ligands, cation exchange capacity, and the concentration of zinc. Precipitation of soluble zinc compounds appears to be significant only under reducing conditions in highly polluted water. Generally, at lower pH values, zinc remains as the free ion. The free ion (Zn+2) tends to be adsorbed and transported by suspended solids in unpolluted waters.

Zinc is an essential nutrient that is present in all organisms. Although biota appears to be a minor reservoir of zinc relative to soils and sediments, microbial decomposition of biota in water can produce ligands, such as humic acids, that can affect the mobility of zinc in the aquatic environment through zinc precipitation and adsorption.

The relative mobility of zinc in soil is determined by the same factors that affect its transport in aquatic systems (i.e., solubility of the compound, pH, and salinity)

The redox status of the soil may shift zinc partitioning. Reductive dissolution of iron and manganese (hydr)oxides under suboxic conditions release zinc into the aqueous phase; the persistence of suboxic conditions may then lead to a repartitioning of zinc into sulfide and carbonate solids. The mobility of zinc in soil depends on the solubility of the speciated forms of the element and on soil properties such as cation exchange capacity, pH, redox potential, and chemical species present in soil; under anaerobic conditions, zinc sulfide is the controlling species.

Since zinc sulfide is insoluble, the mobility of zinc in anaerobic soil is low. In a study of the effect of pH on zinc solubility: When the pH is <7, an inverse relationship exists between the pH and the amount of zinc in solution. As negative charges on soil surfaces increase with increasing pH, additional sites for zinc adsorption are activated and the amount of zinc in solution decreases. The active zinc species in the adsorbed state is the singly charged zinc hydroxide species (i.e., Zn[OH]+). Other investigators have also shown that the mobility of zinc in soil increases at lower soil pH under oxidizing conditions and at a lower cation exchange capacity of soil. On the other hand, the amount of zinc in solution generally increases when the pH is >7 in soils high in organic matter. This is a result of the release of organically complexed zinc, reduced zinc adsorption at higher pH, or an increase in the concentration of chelating agents in soil. For calcareous soils, the relationship between zinc solubility and pH is nonlinear. At a high pH, zinc in solution is precipitated as Zn(OH)2, zinc carbonate (ZnCO3), or calcium zincate. Clay and metal oxides are capable of sorbing zinc and tend to retard its mobility in soil. Zinc was more mobile at pH 4 than at pH 6.5 as a consequence of sorbing

Zinc concentrations in the air are relatively low, except near industrial sources such as smelters. No estimate for the atmospheric lifetime of zinc is available at this time, but the fact that zinc is transported long distances in air indicates that its lifetime in air is at least on the order of days. There are few data regarding the speciation of zinc released to the atmosphere. Zinc is removed from the air by dry and wet deposition, but zinc particles with small diameters and low densities suspended in the atmosphere travel long distances from emission sources.

For silica amorphous:

Amorphous silica is chemically and biologically inert. It is not biodegradable. Due to its insolubility in water there is a separation at every filtration and sedimentation process.]

Crystalline and/or amorphous silicas are ubiquitous on the earth in soils and sediments, and in living organisms (e.g. diatoms), but only the dissolved form is bioavailable. On a global scale, the level of man-made synthetic amorphous silicas (SAS) represents up to 2.4% of the dissolved silica naturally present in the aquatic environment. The rate of SAS released into the environment during the product life cycle is negligible in comparison with the natural flux of silica in the environment

Untreated SASs have a relatively low water solubility of 1.91 to 2.51 mmol/l (114 - 151 mg/l) and an extremely low vapour pressure (e.g. < 10–3 Pa at 20° C for Aerosil R972). On the

Untreated SASs have a relatively low water solubility of 1.91 to 2.51 mmol/l (114 - 151 mg/l) and an extremely low vapour pressure (e.g. < 10–3 Pa at 20° C for Aerosil R972). On the basis of these properties it is expected that SAS released into the environment will be distributed mainly into soil/sediment, slightly into water, and probably not at all into air. With surface-treated SASs, the addition of organosilicon compounds increases the hydrophobicity. Consequently, the water solubility is lower than that of untreated silica. The vapour pressure remains extremely low. Due to the presence of organic substances such as surfactants, salts, acids and alkalis in the environment, it is expected that surface-treated silica will be wetted and then adsorbed onto soils or sediments.

SAS is regarded as an inert substance and is not expected to undergo any transformation in the atmospheric or terrestrial compartment, apart from dissolution by water. Biodegradability in sewage treatment plant or in surface water is not applicable to inorganic substances like SAS. Therefore the biodegradation endpoint has limited relevance for SAS. In surface modified SASs, the most common treating agents are organosilicon compounds and these generally represent less than 5% of the material. Biodegradation in sewage treatment plant or in surface water is not expected. Some biodegradation in soil may occur by analogy with the behaviour of linear polydimethylsiloxane in this compartment

Based on available data, SAS is not toxic to environmental organisms (apart from physical desiccation in insects). SAS presents a low risk for adverse effects to the environment. When hydrophilic SASs (Aerosil 200 and Ultrasil VN3; purity 100% and 98%, respectively), were tested for their acute toxicity to fish and crustaceans, the LC50 and EC50 values were higher than 10,000 mg/l and 1,000 mg/l, respectively.

The zebra fish (*Brachydanio rerio*) test was performed with SAS in suspension, due to the insolubility of the SAS. No mortality was observed for the fish after 96 hours of exposure at 1,000 mg/l and 10,000 mg/l. The test media remained turbid throughout the test, indicating that the limit of solubility of the product was exceeded.

With the water flea (Daphnia magna), SAS suspensions exceeding the limit of solubility were tested.; some immobilisation was observed. However, no significant immobilisation was observed when a solution filtered through microfibre glass filter was tested. The observed effects were likely caused by physical hampering of the Daphnia due to the presence of

A surface-treated SAS (Aerosil R974; 99.9% pure) was tested on fish and crustaceans. The LC50 to fish and EC50 to Daphnia were found to be higher than 10,000 mg/l and 1,000 mg/l, respectively

The EC50 to algae was found to be higher than 10,000 mg/l filtered suspension The actual dissolved concentrations were not determined. There was no inhibition of the biomass or of the growth rate with the 10,000 mg/l filtered suspension.





The antibacterial effect of pressed and unpressed high purity SAS (Aerosil, unspecified) (0.2 g silica + 0.15 ml bacteria strain suspension) kept at 22 C has been investigated (SAS is sometimes pressed to remove air before transportation). The following micro-organisms were studied: Escherichia coli, Proteus sp., Pseudomonas aeruginosa, Aerobacter aerogenes, Micrococcus pyrogenes aureus, Streptococcus faecalis, Streptococcus pyrogenes humans, Corynebacterium diphtheria, Candida albicans and Bacillus subtilis. The SAS was contaminated either by hand contact, by saliva droplets or by contact with the atmosphere. Rodshaped gram-negative organisms (Escherichia coli, Bacterium proteus, Pseudomonas aeruginosa)

and Aerobacter aerogenes) died between 6 hours and 3 days in contact with unpressed SAS. Gram-positive micro-organisms were somewhat more resistant. In addition, the tests demonstrated that survival of bacteria was shorter in unpressed than in pressed SAS.

The literature on the fate of silica in the environment concerns dissolved silica in the aquatic environment, irrespective of its origin (man-made or natural), or structure (crystalline or amorphous). Indeed, once released and dissolved into the environment no distinction can be made between the initial forms of silica. At normal environmental pH, dissolved silica exists exclusively as monosilicic acid [Si(OH)4]. At pH 9.4 the solubility of amorphous silica is about 120 mg SiO2/I. Quartz has a solubility of only 6 mg/I, but its rate of dissolvedion is so slow at ordinary temperature and pressure that the solubility of amorphous silica represents the upper limit of dissolved silica concentration in natural waters. Moreover, silicic acid is the bioavailable form for aquatic organisms and it plays an important role in the biogeochemical cycle of Si, particularly in the oceans.

In the oceans, the transfer of dissolved silica from the marine hydrosphere to the biosphere initiates the global biological silicon cycle. Marine organisms such as diatoms, silicoflagellates and radiolarians build up their skeletons by taking up silicic acid from seawater. After these organisms die, the biogenic silica accumulated in them partly dissolves. The portion of the biogenic silica that does not dissolve settles and ultimately reaches the sediment. The transformation of opal (amorphous biogenic silica) deposits in sediments through diagenetic processes allows silica to re-enter the geological cycle. Silica is labile between the water and sediment interface.

Ecotoxicity:

Fish LC50 (96 h): Brachydanio rerio >10000 mg/l; zebra fish >10000 mg/l Daphnia magna EC50 (24 h): >1000 mg/l; LC50 924 h): >10000 mg/l

DO NOT discharge into sewer or waterways

12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
silica amorphous	LOW	LOW

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation	
zinc oxide	LOW (BCF = 217)	
silica amorphous	LOW (LogKOW = 0.5294)	

12.4. Mobility in soil

Ingredient	Mobility
silica amorphous	LOW (KOC = 23.74)

12.5. Results of PBT and vPvB assessment

	Р	В	Т
Relevant available data	Not Available	Not Available	Not Available
PBT	X	×	X
PBT vPvB	×	×	×
PBT Criteria fulfilled?			No
vPvB			No

12.6. Endocrine Disruption Properties

Not Available

12.7. Other adverse effects

Not Available

SECTION 13 Disposal considerations

13.1. Waste treatment methods

Product / Packaging disposal

- ▶ Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and SDS and observe all notices pertaining to the product
- 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 of disposal facility can be identified. Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material) Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed. 			
Waste treatment options	Not Available			
Sewage disposal options	wage disposal options Not Available			
gp				
ECTION 14 Transport infor	mation			

I and transport (ADR-RID)

Land transport (ADR-RID)				
14.1. UN number	3077			
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)			
14.3. Transport hazard class(es)	Class 9 Subrisk Not Applicable			
14.4. Packing group	III	III		
14.5. Environmental hazard	Environmentally hazardous	Environmentally hazardous		
	Hazard identification (Kemler)	90		
	Classification code	M7		
14.6. Special precautions for	Hazard Label	9		
user	Special provisions	274 335 375 601		
	Limited quantity	5 kg		
	Tunnel Restriction Code	3 (-)		

Air transport (ICAO-IATA / DGR)

14.1. UN number	3077		
14.2. UN proper shipping name	Environmentally hazardo	ous substance, solid, n.o.s. * (contains z	inc oxide)
	ICAO/IATA Class	9	
14.3. Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable	
Class(es)	ERG Code	9L	
14.4. Packing group	Ш		
14.5. Environmental hazard	Environmentally hazardo	ous	
	Special provisions		A97 A158 A179 A197 A215
	Cargo Only Packing Instructions		956
	Cargo Only Maximum Qty / Pack		400 kg
14.6. Special precautions for user	Passenger and Cargo	Packing Instructions	956
4501	Passenger and Cargo Maximum Qty / Pack		400 kg
	Passenger and Cargo Limited Quantity Packing Instructions		Y956
	Passenger and Cargo Limited Maximum Qty / Pack		30 kg G

Sea transport (IMDG-Code / GGVSee)

14.1. UN number 3077





14.2. UN proper shipping name	ENVIRONMENTALL	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)		
14.3. Transport hazard	IMDG Class	9		
class(es)	IMDG Subrisk Not Applicable			
14.4. Packing group	III	III		
14.5. Environmental hazard	Marine Pollutant			
	EMS Number	F-A, S-F		
14.6. Special precautions for user	Special provisions	274 335 966 967 969		
	Limited Quantities	5 kg		

Inland waterways transport (ADN)

14.1. UN number	3077				
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains zinc oxide)				
14.3. Transport hazard class(es)	9 Not Applicable	9 Not Applicable			
14.4. Packing group	Ш				
14.5. Environmental hazard	Environmentally hazard	Environmentally hazardous			
	Classification code	M7			
	Special provisions	274; 335; 375; 601			
14.6. Special precautions for user	Limited quantity 5 kg				
400.	Equipment required	PP, A***			
	Fire cones number	0			

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

Not Applicable

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

Product name	Group
zinc oxide	Not Available
silica amorphous	Not Available

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
zinc oxide	Not Available
silica amorphous	Not Available

SECTION 15 Regulatory information

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

zinc oxide is found on the following regulatory lists

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances

silica amorphous is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

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

European Union Directive (EU) 2017/2398 amending Directive 2004/37/EC on the protection of workers from the risks related to exposure to carcinogens or mutagens at work

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

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





This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable - : Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, - 2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	Yes
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
National Inventory	Status
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	01/04/2022
Initial Date	05/08/2017

Full text Risk and Hazard codes

H400	Vary taxis to aquetia life
H400	Very toxic to aquatic life.

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

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

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

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

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

Reason For Change

A-2.00 - Modifications to the safety data sheet

Part Number Table

Part Number

MP014025

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