

LOW CARBON CEMENT

Chemwatch: 5628-34 Version No: 2.1

Safety Data Sheet according to the Health and Safety at Work (Hazardous Substances) Regulations 2017

Chemwatch Hazard Alert Code: 3

Issue Date: 21/09/2023 Print Date: 03/10/2023 S.GHS.NZL.EN.E

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

Product Identifier

Product name	EcoStrong Low Carbon Cement
Chemical Name	Not Applicable
Synonyms	Not Available
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses

Cement.

Details of the manufacturer or supplier of the safety data sheet

Registered company name	Cemix (a part of Ardex NZ)
Address	19 Alfred Street Onehunga Auckland 1061 New Zealand
Telephone	+64 9 636 1000
Fax	+64 9 636 0000
Website	www.cemix.co.nz
Email	Not Available

Emergency telephone number

Association / Organisation	Cemix (a part of Ardex NZ)
Emergency telephone numbers	0800 ASK CEMIX
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Classification ^[1]	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI
Determined by Chemwatch using GHS/HSNO criteria	6.3A, 8.3A, 6.5B (contact), 6.9B, 6.1E (respiratory tract irritant)

Label elements

Hazard pictogram(s)







Signal word

Danger

Hazard statement(s)

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H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H318	Causes serious eye damage.
H335	May cause respiratory irritation.
H373	May cause damage to organs through prolonged or repeated exposure.

Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P264	Wash all exposed external body areas thoroughly after handling.
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/doctor/physician/first aider.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

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

SECTION 3 Composition / information on ingredients

P501

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
65997-15-1	>60	portland cement
13397-26-7	<10	calcium carbonate
13397-24-5	5	<u>gypsum</u>
Legend: 1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Anne VI; 4. Classification drawn from C&L * EU IOELVs available		

SECTION 4 First aid measures

Description of first aid measures

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Eye Contact	 If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
Inhalation	 If dust is inhaled, remove from contaminated area. Encourage patient to blow nose to ensure clear passage of breathing. If irritation or discomfort persists seek medical attention.
Ingestion	 If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice.

Indication of any immediate medical attention and special treatment needed

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

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

Alkalis continue to cause damage after exposure.

INGESTION:

Milk and water are the preferred diluents

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

- ▶ Neutralising agents should never be given since exothermic heat reaction may compound injury.
- * Catharsis and emesis are absolutely contra-indicated.
- * Activated charcoal does not absorb alkali.
- * Gastric lavage should not be used.

Supportive care involves the following:

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

SKIN AND EYE:

▶ Injury should be irrigated for 20-30 minutes.

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

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.	
Advice for firefighters		
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. 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	 Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: silicon dioxide (SiO2) May emit corrosive fumes. May emit poisonous fumes. 	

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Clean up all 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. Sweep up, shovel up or Vacuum up (consider explosion-proof machines designed to be grounded during storage and use). Place spilled material in clean, dry, sealable, labelled container.
Major Spills	Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses. Recover product wherever possible. IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal. ALWAYS: Wash area down with large amounts of water and prevent runoff into drains. If contamination of drains or waterways occurs, advise Emergency Services.

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

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SECTION 7 Handling and storage

Precautions for safe handling

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- ▶ 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.
- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- ▶ Store away from incompatible materials and foodstuff containers.
- ▶ Protect containers against physical damage and check regularly for leaks.
- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS. For major quantities:

Other information

Safe handling

• Consider storage in bunded areas - ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).

• Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

Conditions for safe storage, including any incompatibilities

Suitable container

- Lined metal can, lined metal pail/ can.
- ▶ Plastic pail.
- Polyliner drum.
- ▶ Packing as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.
- Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.
- Avoid reaction with oxidising agents
- Avoid contact with copper, aluminium and their alloys.

strong alkalis

alcohols

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

Storage incompatibility

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
New Zealand Workplace Exposure Standards (WES)	portland cement	Cement (Portland cement)	3 mg/m3	Not Available	Not Available	(dsen) - Dermal sensitiser
New Zealand Workplace Exposure Standards (WES)	portland cement	Cement (Portland cement) respirable dust	1 mg/m3	Not Available	Not Available	(dsen) - Dermal sensitiser
New Zealand Workplace Exposure Standards (WES)	calcium carbonate	Calcium carbonate	10 mg/m3	Not Available	Not Available	Not Available
New Zealand Workplace Exposure Standards (WES)	calcium carbonate	Limestone (Calcium carbonate)	10 mg/m3	Not Available	Not Available	Not Available
New Zealand Workplace Exposure Standards (WES)	gypsum	Calcium sulphate (Gypsum, Plaster of Paris)	10 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

calcium carbonate 45 mg/m3	210 mg/m3	1,300 mg/m3

Ingredient	Original IDLH	Revised IDLH
portland cement	5,000 mg/m3	Not Available
calcium carbonate	Not Available	Not Available
gypsum	Not Available	Not Available

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

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design of a ventilation system must match the particular process and chemical or contaminant in use. Employers may need to use multiple types of controls to prevent employee overexposure

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:
- (a): particle dust respirators, if necessary, combined with an absorption cartridge;
- (b): filter respirators with absorption cartridge or canister of the right type;
- (c): fresh-air hoods or masks.

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500- 2000 f/min.)

Within each range the appropriate value depends on:

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

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Individual protection measures, such as personal protective equipment













Eye and face protection

Safety glasses with side shields

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

Skin protection

See Hand protection below

Hands/feet protection

- ▶ 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, belts and watch-bands should be removed and destroyed.

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Personal hygiene is a key element of effective hand care. 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:

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· Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

▶ Neoprene rubber gloves

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

See Other protection below

Other protection

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

Respiratory protection

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

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

* - Negative pressure demand ** - Continuous flow

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

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

	• •		
Appearance	Grey or white powder with no odour; insoluble in wa	ter.	
Physical state	Divided Solid	Relative density (Water = 1)	2.93-3.09
Odour	Not Available	Partition coefficient n- octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Applicable
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	~12 (slurry)

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 Vapour density (Air = 1)
 Not Applicable

 VOC g/L
 Not Applicable

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Inhaled	The material can cause respiratory irritation in some persons. The body	ly's response to such irritation can cause further lung damage.	
Ingestion	The material has NOT been classified by EC Directives or other classif of corroborating animal or human evidence.	fication systems as "harmful by ingestion". This is because of the lack	
Skin Contact	This material can cause inflammation of the skin on contact in some per The material may accentuate any pre-existing dermatitis condition Handling wet cement can cause dermatitis. Cement when wet is quite a cement contact dermatitis since it may cause drying and defatting of the possible infections of lesions and penetration by soluble salts. Skin contact may result in severe irritation particularly to broken skin. Uskin cancer are significantly related. Open cuts, abraded or irritated skin should not be exposed to this mate Entry into the blood-stream, through, for example, cuts, abrasions or leskin prior to the use of the material and ensure that any external damage.	alkaline and this alkali action on the skin contributes strongly to ne skin which is followed by hardening, cracking, lesions developing, Ulceration known as "chrome ulcers" may develop. Chrome ulcers and erial esions, may produce systemic injury with harmful effects. Examine the	
Eye	If applied to the eyes, this material causes severe eye damage.		
Chronic	Skin contact with the material is more likely to cause a sensitisation real Cement contact dermatitis (CCD) may occur when contact shows an a due to soluble chromates (chromate compounds) present in trace amo readily penetrate intact skin. Cement dermatitis can be characterised be contact with highly alkaline mixtures may cause localised necrosis. Cement eczema may be due to chromium in feed stocks or contaminat Sensitisation to chromium may be the leading cause of nickel and cobacement dermatoses [ILO]. Repeated, prolonged severe inhalation exposure may cause pulmonar from dust-induced bronchitis with chronic bronchitis reported in 17% of Respiratory symptoms and ventilatory function were studied in a group cement plants, with at least 5 years of exposure (1). This group had a sexpiratory volume at 1 s (FEV1) and forced expiratory flows after exhal suggests that occupational exposure to Portland cement dust may lead reduction of ventilatory capacity. Chun-Yuh et al; Journal of Toxicology and Environmental Health 49: 58 Overexposure to the breathable dust may cause coughing, wheezing, may include decreased vital lung capacity and chest infections. Repeating produce a condition known as pneumoconiosis, which is the lodge is particularly true when a significant number of particles less than 0.5 ray. Symptoms of pneumoconiosis may include a progressive dry coug weakness and weight loss. As the disease progresses, the cough prod of breath becomes more severe. Other signs or symptoms include chaemphysema and rarely, pneumothorax (air in the lung cavity). Removing workers from the possibility of further exposure to dust gene potential for worker exposure, examinations at regular period with emp Inhaling dust over an extended number of years may cause pneumocos subsequent tissue reaction. This may or may not be reversible.	spiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. If color may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is If color may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is If color may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is If color may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is If color may occur when contact shows an allergic response, which may progress to sensitisation. Sensitisation is If color may be the demandation of the color may be succeeded and comments and cement products. Soluble chromates If color may be the leading cause of nickel and cobalt sensitivity and the high alkalinity of cement is an important factor in If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the writing the color may be the leading cause of nickel and cobalt sensitivity and the high alkalinity of cement is an important factor in If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the writing the color may be the leading cause of nickel and cobalt sensitivity and the high alkalinity of cement is an important factor in If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the inhalation exposure may cause pulmonary oedema and rarely, pulmonary fibrosis. Workers may also suffer If the inhalation exposure may cause pulmonary	
EcoStrong Low Carbon	TOXICITY	IRRITATION	

EcoStrong Low Carbon	TOXICITY	IRRITATION
Cement	Not Available	Not Available
	TOXICITY	IRRITATION
portland cement	Not Available	Not Available
	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 0.75 mg/24h - SEVERE
calcium carbonate	Inhalation(Rat) LC50: >3 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50: >2000 mg/kg ^[1]	Skin (rabbit): 500 mg/24h-moderate
		Skin: no adverse effect observed (not irritating) ^[1]

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Inhalation(Rat) LC50: >3.26 mg/l4h ^[1] Oral (Rat) LD50: >1581 mg/kg/l ¹ Legend: 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances PORTLAND CEMENT The following information refers to contact allergens as a group and may not be specific to this product. Contact allergens quickly manifest themselves as contact eczama, more rarely as unicaria or Cluricke's oederna. The pathogenesis of contact eczama involves a celi-mediated (1 hymphocytes) temmer reaction of the delayed type. Other allerge skin reactions, e.g. contact products are contact allergens and produce of the delayed type. Other allerge skin reactions, e.g. contact produces are cell-mediated (1 hymphocytes) temmer reaction of the delayed type. Other allerges with reactions, e.g. contact produces are cell-mediated (1 hymphocytes) temmer reaction of the delayed type. Other allerges with reactions, e.g. contact produces are cell-mediated (1 hymphocytes) temmer reaction of the delayed type. Other allerges with reactions, e.g. contact produces are cell-mediated (1 hymphocytes) temmer reaction of the delayed type. Other allerges with reactions are cell-mediated to the cell-mediated of the delayed type. Other allerges with reactions, e.g. contact produces are cell-mediated to the cell-mediated type of the produce of mediated type of the cell-mediated type of the cell-mediated type of the cell-mediated type of the cell-mediated type	gypsum	TOXICITY	IRRITATION		
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 The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact exzema, more rarely as uriticaria or Quincke's oedema. The pathogenesis of contact excersa in contact excersa in which as widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into instant. From a clinical point of level, substances are not every portural service or than the results of the contact allergen in not simply determined by its sensitisation or tricard. From a clinical point of level, substances are not every control to tested. CALCIUM CARBONATE CALCIUM CARBONATE CALCIUM CARBONATE CALCIUM CARBONATE The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the produce conjunctivities. The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production or vestices, scaling and thickening of the skin. Gypsum (calcium sulfate dehydrate) irritates the skin, eye, mucous membranes, and airways. A series of studies involving Gypsum industry were chronically sexposed to gypsum dust. Synergistic/antagonistic effects. Gypsum appears to be protective on quartz toxicity in animal testing, the production of vesticities in animals. Carcine-causing potential. Tests involving arimals produced mixed results, no causal relationship between gypsum and tumour formation with formation and control of the		Inhalation(Rat) LC50: >3.26 mg/l4h ^[1]	Not Available		
PORTLAND CEMENT CALCIUM CARBONATE Oyssum (Calcium Signature) Oyssum (Calcium Signat		Oral (Rat) LD50: >1581 mg/kg ^[1]			
PORTLAND CEMENT PORTLAND CEMENT PORTLAND CEMENT CALCIUM CARBONATE CALCIUM CARBONATE Gypsum (action) of voices and produce and produced or produced and produced or produced produc	Legend:	, •	•	otained from manufacturer's SDS. Unless otherwise	
PORTLAND CEMENT PORTLAND CEMENT PORTLAND CEMENT CALCIUM CARBONATE CALCIUM CARBONATE Gypsum (action) of voices and produce and produced or produced and produced or produced produc					
The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Gypsum (calcium sulfate dehydrate) irritates the skin, eye, mucous membranes, and airways. A series of studies involving Gypsum industry workers in Poland reported chronic, non-specific airways diseases. Repeat dose brokich: Examination of workers at a gypsum manufacturing plant found restrictive defects on long-function tests in those who were chronically exposed to gypsum dust. Synergistic/antagonistic effects: Gypsum appears to be protective on quartz toxicity in animal testing. On the other hand, it tended to aggravate tuberculosis in animals. Cytotoxicity: Test on bacterial cells have shown negative results. Developmental toxicity: In animal testing, developmental toxicity was not seen. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosing of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial phyereactivity on methacholine challenge testing, and the lack of minimal hymphocytic inflammation, without ecsinophila. RADS (or asthma) following an irritation in infequent disorder with rates related to the concentration of and duration of exposure to the irritant. Other criteria for diagnosis of RADS is a disorder that occurs as a result of exposure due	PORTLAND CEMENT	Contact allergies quickly manifest themselves as contact eczema, more contact eczema involves a cell-mediated (T lymphocytes) immune reacurticaria, involve antibody-mediated immune reactions. The significance potential: the distribution of the substance and the opportunities for corwhich is widely distributed can be a more important allergen than one vecontact. From a clinical point of view, substances are noteworthy if they	e rarely as urticari tion of the delaye e of the contact al tract with it are eq with stronger sens	a or Quincke's oedema. The pathogenesis of d type. Other allergic skin reactions, e.g. contact lergen is not simply determined by its sensitisation ually important. A weakly sensitising substance itising potential with which few individuals come into	
workers in Poland reported chronic, non-specific airways diseases. Repeat dose toxicity: Examination of workers at a gypsum manufacturing plant found restrictive defects on long-function tests in those who were chronically exposed to gypsum dust. Synergistic/antagonistic effects: Cypsum appears to be protective on quartz toxicity in animal testing. On the other hand, it tended to aggravate tuberculosis in animals. Cytotoxicity: Tests results regarding cytotoxicity have been negative. Cancer-causing potential: Tests involving animals produced mixed results; no causal relationship between gypsum and tumour formation was found. Genetic toxicity: I earl on bacterial cells have shown negative results. Developmental toxicity: In animal testing, developmental toxicity was not seen. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without cessingulis. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production. PORTLAND CEMENT & Skin Irritation/Corr	CALCIUM CARBONATE	The material may produce severe irritation to the eye causing pronounce produce conjunctivitis. The material may cause skin irritation after prolonged or repeated expo	ced inflammation.	Repeated or prolonged exposure to irritants may	
CONDITION OF THE ACT OF THE PORTLAND CEMENT & CALCIUM CARBONATE & GYPSUM PORTLAND CEMENT & CALCIUM CARBONATE & GYPSUM GYPSUM CARBONATE & GYPSUM PORTLAND CEMENT & GYPSUM ACREA COLOR	GYPSUM	workers in Poland reported chronic, non-specific airways diseases. Repeat dose toxicity: Examination of workers at a gypsum manufacturing plant found restrictive defects on long-function tests in those who were chronically exposed to gypsum dust. Synergistic/antagonistic effects: Gypsum appears to be protective on quartz toxicity in animal testing. On the other hand, it tended to aggravate tuberculosis in animals. Cytotoxicity: Tests results regarding cytotoxicity have been negative. Cancer-causing potential: Tests involving animals produced mixed results; no causal relationship between gypsum and tumour formation was found. Genetic toxicity: Test on bacterial cells have shown negative results.			
Acute Toxicity X Carcinogenicity X Skin Irritation/Corrosion Reproductivity X Serious Eye Damage/Irritation Respiratory or Skin sensitisation	CALCIUM CARBONATE &	condition known as reactive airways dysfunction syndrome (RADS) wh compound. Main criteria for diagnosing RADS include the absence of p of persistent asthma-like symptoms within minutes to hours of a docum include a reversible airflow pattern on lung function tests, moderate to and the lack of minimal lymphocytic inflammation, without eosinophilia. disorder with rates related to the concentration of and duration of exposits a disorder that occurs as a result of exposure due to high concentrate.	ich can occur afte orevious airways d nented exposure to severe bronchial h RADS (or asthma sure to the irritatin ions of irritating su	r exposure to high levels of highly irritating lisease in a non-atopic individual, with sudden onset to the irritant. Other criteria for diagnosis of RADS syperreactivity on methacholine challenge testing, a) following an irritating inhalation is an infrequent g substance. On the other hand, industrial bronchitis ubstance (often particles) and is completely	
Skin Irritation/Corrosion Serious Eye Damage/Irritation Respiratory or Skin sensitisation Stort - Single Exposure Stort - Repeated Exposure		No significant acute toxicological data identified in literature search.			
Serious Eye Damage/Irritation Respiratory or Skin sensitisation Serious Eye STOT - Single Exposure STOT - Repeated Exposure	Acute Toxicity	×	arcinogenicity	×	
Damage/Irritation Respiratory or Skin sensitisation STOT - Single Exposure STOT - Repeated Exposure	Skin Irritation/Corrosion	v	Reproductivity	×	
sensitisation S101 - Repeated Exposure	•	✓ STOT - Si	ngle Exposure	v	
Mutagenicity X Aspiration Hazard X		❖ STOT - Repe	ated Exposure	~	
	Mutagenicity	X	iration Hazard	×	

Legend:

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

SECTION 12 Ecological information

Toxicit

ty					
	Endpoint	Test Duration (hr)	Species	Value	Source
EcoStrong Low Carbon Cement	Not Available	Not Available	Not Available		Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
portland cement	Not Available	Not Available	Not Available Not Availa		Not Availabl
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>14mg/l	2
calcium carbonate	NOEC(ECx)	1h	Fish	4-320mg/l	4
	LC50	96h	Fish	>165200mg/L	4
gypsum	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>79mg/l	2
	EC50	96h	Algae or other aquatic plants	3200mg/l	4
	NOEC(ECx)	0.25h	Fish	75mg/l	4

Continued...

EcoStrong Low Carbon Cement

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	LC50	96h	Fish	>79mg/l	2
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EP. Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data				

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
gypsum	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation	
gypsum	LOW (LogKOW = -2.2002)	

Mobility in soil

Ingredient	Mobility
gypsum	LOW (KOC = 6.124)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal

L DO NOT allamonada

- ▶ 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.

Ensure that the hazardous substance is disposed in accordance with the Hazardous Substances (Disposal) Notice 2017

Disposal Requirements

Packages that have been in direct contact with the hazardous substance must be only disposed if the hazardous substance was appropriately removed and cleaned out from the package. The package must be disposed according to the manufacturer's directions taking into account the material it is made of. Packages which hazardous content have been appropriately treated and removed may be recycled.

The hazardous substance must only be disposed if it has been treated by a method that changed the characteristics or composition of the substance and it is no longer hazardous.

Only dispose to the environment if a tolerable exposure limit has been set for the substance.

Only deposit the hazardous substance into or onto a landfill or sewage facility or incinerator, where the hazardous substance can be handled and treated appropriately.

SECTION 14 Transport information

Labels Required

Eubelo Requireu	
Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (UN): 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

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

Not Applicable

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

•	
Product name	Group
portland cement	Not Available
calcium carbonate	Not Available
gypsum	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
portland cement	Not Available
calcium carbonate	Not Available
gypsum	Not Available

EcoStrong Low Carbon Cement

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SECTION 15 Regulatory information

Version No: 2.1

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

This substance is to be managed using the conditions specified in an applicable Group Standard

HSR Number	Group Standard
HSR002544	Construction Products Subsidiary Hazard Group Standard 2020

Please refer to Section 8 of the SDS for any applicable tolerable exposure limit or Section 12 for environmental exposure limit.

portland cement is found on the following regulatory lists

New Zealand Inventory of Chemicals (NZIoC)

New Zealand Workplace Exposure Standards (WES)

calcium carbonate is found on the following regulatory lists

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

New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals

New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data

New Zealand Inventory of Chemicals (NZIoC)

New Zealand Workplace Exposure Standards (WES)

gypsum is found on the following regulatory lists

New Zealand Inventory of Chemicals (NZIoC)

New Zealand Workplace Exposure Standards (WES)

Hazardous Substance Location

Subject to the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Quantities
Not Applicable	Not Applicable

Certified Handler

Subject to Part 4 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Class of substance	Quantities
Not Applicable	Not Applicable

Refer Group Standards for further information

Maximum quantities of certain hazardous substances permitted on passenger service vehicles

Subject to Regulation 13.14 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Gas (aggregate water capacity in mL)	Liquid (L)	Solid (kg)	Maximum quantity per package for each classification
6.5A or 6.5B	120	1	3	

Tracking Requirements

Not Applicable

National Inventory Status

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

21/09/2023

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Version No: 2.1

EcoStrong Low Carbon Cement

Initial Date

25/08/2023

Other information

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

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

Definitions and abbreviations

PC• TWA: Permissible Concentration-Time Weighted Average

PC. STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit• •

IDLH: Immediately Dangerous to Life or Health Concentrations

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 INSO: Inventario Nacional de Sustancias Químicas

NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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TEL (+61 3) 9572 4700.

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