

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17  
Version: 5.6

Page: 1/7  
(30232235/MDS\_GEN\_US/EN)

### 1. Substance/preparation and company identification

Company

BASF Polyurethane Foam Enterprises LLC  
13630 Watertower Circle  
Minneapolis, MN 55441

24 Hour Emergency Response Information

CHEMTREC: 1-800-424-9300  
Hotline: 1-800-888-3342

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Molecular weight: 360 g/mol  
Chemical family: aromatic isocyanates  
Synonyms: POLYMETHYLENE POLYPHENYLISOCYANATE

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### 2. Composition/information on ingredients

<u>CAS Number</u>	<u>Content (W/W)</u>	<u>Chemical name</u>
101-68-8	38.0 %	Diphenylmethane-4,4'-diisocyanate (MDI)
26447-40-5	< 10.0 %	MDI Mixed Isomers
9016-87-9	< 55.0 %	P-MDI

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### 3. Hazard identification

Emergency overview

CAUTION: CONTAINS DIPHENYLMETHANE DIISOCYANATE (CAS No. 101-68-8). INHALATION OF MDI MISTS OR VAPORS MAY CAUSE RESPIRATORY IRRITATION, BREATHLESSNESS, CHEST DISCOMFORT AND REDUCED PULMONARY FUNCTION. OVEREXPOSURE WELL ABOVE THE PEL MAY RESULT IN BRONCHITIS, BRONCHIAL SPASMS AND PULMONARY EDEMA. LONG-TERM EXPOSURE TO ISOCYANATES HAS BEEN REPORTED TO CAUSE LUNG DAMAGE, INCLUDING REDUCED LUNG FUNCTION WHICH MAY BE PERMANENT. ACUTE OR CHRONIC OVEREXPOSURE TO ISOCYANATES MAY CAUSE SENSITIZATION IN SOME INDIVIDUALS, RESULTING IN ALLERGIC RESPIRATORY REACTIONS INCLUDING WHEEZING, SHORTNESS OF BREATH AND DIFFICULTY BREATHING.

Potential health effects

**Primary routes of exposure**

Routes of entry for solids and liquids include eye and skin contact, ingestion and inhalation. Routes of entry for gases include inhalation and eye contact. Skin contact may be a route of entry for liquified gases.

**Acute toxicity:**

Information on: MDI

*Inhalation of MDI vapors may cause irritation of the mucous membranes of the nose, throat or trachea, breathlessness, chest discomfort, difficult breathing and reduced pulmonary function. Air-borne overexposure well above the PEL may result additionally in eye irritation, headache, chemical bronchitis, asthma-like findings or pulmonary edema. Isocyanates have also been reported to*

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17

Page: 2/7

Version: 5.6

(30232235/MDS\_GEN\_US/EN)

*cause hypersensitivity pneumonitis, which is characterized by flu-like symptoms, the onset of which may be delayed. Gastrointestinal symptoms include nausea, vomiting and abdominal pain.*

### **Irritation:**

*Information on: Diisocyanates*

*Eye contact with isocyanates may result in conjunctival irritation and mild corneal opacity. Skin contact may result in dermatitis, either irritative or allergic.*

### **Repeated dose toxicity:**

*Information on: MDI*

*Results from a lifetime inhalation study in rats indicate that MDI aerosol was carcinogenic at 6 mg/m<sup>3</sup>, the highest dose tested. This is well above the recommended TLV of 5 ppb (0.05 mg/m<sup>3</sup>). Only irritation was noted at the lower concentration of 0.2 and 1 mg/m<sup>3</sup>. No birth defects or teratogenic effects were reported in a teratology study with rats exposed to 1, 4, and 12 mg/m<sup>3</sup> polymeric MDI for 6 hr/day on days 6-15 of gestation. Embryotoxicity and fetotoxicity was reported at the top dose in the presence of maternal toxicity.*

*Information on: Isocyanates*

*As a result of previous repeated overexposures or a single large dose, certain individuals will develop isocyanate sensitization (chemical asthma) which will cause them to react to a later exposure to isocyanate at levels well below the PEL/TLV. These symptoms, which include chest tightness, wheezing, cough, shortness of breath, or asthmatic attack, could be immediate or delayed up to several hours after exposure. Similar to many non-specific asthmatic responses, there are reports that once sensitized an individual can experience these symptoms upon exposure to dust, cold air, or other irritants. This increased lung sensitivity can persist for weeks and in severe cases for several years. Chronic overexposure to isocyanates has also been reported to cause lung damage, including a decrease in lung function, which may be permanent. Sensitization may be either temporary or permanent. Prolonged contact can cause reddening, swelling, rash, scaling, or blistering. In those who have developed a skin sensitization, these symptoms can develop as a result of contact with very small amounts of liquid material, or even as a result of vapor-only exposure.*

### **Medical conditions aggravated by overexposure:**

The isocyanate component is a respiratory sensitizer. It may cause allergic reaction leading to asthma-like spasms of the bronchial tubes and difficulty in breathing.

Medical supervision of all employees who handle or come into contact with isocyanates is recommended.

Contact may aggravate pulmonary disorders.

Persons with history of respiratory disease or hypersensitivity should not be exposed to this product.

Preemployment and periodic medical examinations with respiratory function tests (FEV<sub>1</sub>, FVC as a minimum) are suggested.

An animal study indicated that MDI may induce respiratory hypersensitivity following dermal exposure.

Persons with asthmatic conditions, chronic bronchitis, other chronic respiratory diseases, recurrent eczema or pulmonary sensitization should be excluded from working with isocyanates. Once a person is diagnosed as having pulmonary sensitization (allergic asthma) to isocyanates, further exposure is not recommended.

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## **4. First-aid measures**

### **General advice:**

Remove contaminated clothing.

### **If inhaled:**

Remove the affected individual into fresh air and keep the person calm. Assist in breathing if necessary. Immediate medical attention required.

### **If on skin:**

Wash affected areas thoroughly with soap and water. If irritation develops, seek medical attention.

### **If in eyes:**

In case of contact with the eyes, rinse immediately for at least 15 minutes with plenty of water. Immediate medical attention required.

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17

Page: 3/7

Version: 5.6

(30232235/MDS\_GEN\_US/EN)

### **If swallowed:**

Rinse mouth and then drink plenty of water. Do not induce vomiting. Never induce vomiting or give anything by mouth if the victim is unconscious or having convulsions. Immediate medical attention required.

### **Note to physician**

Hazards:	Symptoms can appear later.
Antidote:	Specific antidotes or neutralizers to isocyanates do not exist.
Treatment:	Treatment should be supportive and based on the judgement of the physician in response to the reaction of the patient.

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## 5. Fire-fighting measures

Flash point:	220 °C	(open cup)
Autoignition:		No data available.

### **Suitable extinguishing media:**

water, dry extinguishing media, carbon dioxide, foam

### **Hazards during fire-fighting:**

nitrous gases, fumes/smoke, isocyanate, vapour

### **Protective equipment for fire-fighting:**

Firefighters should be equipped with self-contained breathing apparatus and turn-out gear.

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## 6. Accidental release measures

### **Personal precautions:**

Clear area. Ensure adequate ventilation. Wear suitable personal protective clothing and equipment.

### **Environmental precautions:**

Do not discharge into drains/surface waters/groundwater.

### **Cleanup:**

Dike spillage.

For small amounts: Absorb isocyanate with suitable absorbent material (see § 40 CFR, sections 260, 264 and 265 for further information). Shovel into open container. Do not make container pressure tight. Move container to a well-ventilated area (outside). Spill area can be decontaminated with the following recommended decontamination solution: Mixture of 90 % water, 8 % concentrated ammonia, 2 % detergent. Add at a 10 to 1 ratio. Allow to stand for at least 48 hours to allow escape of evolved carbon dioxide.

For large amounts: If temporary control of isocyanate vapor is required, a blanket of protein foam or other suitable foam (available from most fire departments) may be placed over the spill. Transfer as much liquid as possible via pump or vacuum device into closed but not sealed containers for disposal.

For residues: The following measures should be taken for final cleanup: Wash down spill area with decontamination solution. Allow solution to stand for at least 10 minutes.

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## 7. Handling and storage

### **Handling**

#### **General advice:**

If bulging of drum occurs, transfer to well ventilated area, puncture to relieve pressure, open vent and let stand for 48 hours before resealing.

#### **Protection against fire and explosion:**

No explosion proofing necessary.

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17

Page: 4/7

Version: 5.6

(30232235/MDS\_GEN\_US/EN)

### Storage

#### **General advice:**

Formation of CO<sub>2</sub> and build up of pressure possible. Keep container tightly closed and in a well-ventilated place. Outage of containers should be filled with dry inert gas at atmospheric pressure to avoid reaction with moisture.

#### **Storage incompatibility:**

General: Segregate from bases.

#### **Storage stability:**

Storage temperature: 60 - 80 °F  
Protect against moisture.

## 8. Exposure controls and personal protection

### Components with workplace control parameters

Diphenylmethane-4,4'-diisocyanate (MDI)	OSHA ACGIH	CLV 0.02 ppm 0.2 mg/m <sup>3</sup> ; TWA value 0.005 ppm ;
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#### **Advice on system design:**

Provide local exhaust ventilation to maintain recommended P.E.L.

### Personal protective equipment

#### **Respiratory protection:**

For situations where the airborne concentrations may exceed the level for which an air purifying respirator is effective, or where the levels are unknown or Immediately Dangerous to Life or Health (IDLH), use NIOSH-certified full facepiece pressure demand self-contained breathing apparatus (SCBA) or a full facepiece pressure demand supplied-air respirator (SAR) with escape provisions. When atmospheric levels may exceed the occupational exposure limit (PEL or TLV) NIOSH-certified air-purifying respirators equipped with an organic vapor sorbent and particulate filter can be used as long as appropriate precautions and change out schedules are in place.

#### **Hand protection:**

Chemical resistant protective gloves, Suitable materials, chloroprene rubber (Neoprene), nitrile rubber (Buna N), chlorinated polyethylene, polyvinylchloride (Pylox), butyl rubber, fluoroelastomer (Viton)

#### **Eye protection:**

Tightly fitting safety goggles (chemical goggles). Wear face shield if splashing hazard exists.

#### **Body protection:**

Suitable materials, saran-coated material

#### **General safety and hygiene measures:**

Wear protective clothing as necessary to prevent contact. Eye wash fountains and safety showers must be easily accessible. Observe the appropriate PEL value. Wash soiled clothing immediately. Contaminated equipment or clothing should be cleaned after each use or disposed of.

## 9. Physical and chemical properties

Form:	liquid	
Odour:	faint odour, aromatic	
Colour:	dark brown	
pH value:		No data available.
Freezing point:	3 °C	( 1 ATM)
Boiling point:	200 °C	( 5 mmHg)
Vapour pressure:	< 0.00001 mmHg	( 20 °C)
Relative density:	1.22	( 25 °C)
Bulk density:	10.16 lb/USg	
Viscosity, dynamic:	200 mPa.s	( 20 °C)

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17

Version: 5.6

Page: 5/7

(30232235/MDS\_GEN\_US/EN)

Miscibility with water:

Reacts with water.

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### 10. Stability and reactivity

**Conditions to avoid:**

Avoid moisture.

**Substances to avoid:**

water, alcohols, strong bases, Substances/products that react with isocyanates.

**Hazardous reactions:**

The product is chemically stable.

Reacts with water, with formation of carbon dioxide. Risk of bursting. Reacts with alcohols. Reacts with acids. Reacts with alkalies. Reacts with amines. Risk of exothermic reaction. Risk of violent reaction. Risk of polymerization. Contact with certain rubbers and plastics can cause brittleness of the substance/product with subsequent loss in strength.

**Decomposition products:**

Hazardous decomposition products: carbon monoxide, hydrogen cyanide, nitrogen oxides, aromatic isocyanates, gases/vapours

**Thermal decomposition:**

> 260 °C

No data available.

**Corrosion to metals:**

No corrosive effect on metal.

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### 11. Toxicological information

**Acute toxicity**

**Oral:**

LD50/rat: > 10,000 mg/kg

Practically nontoxic.

**Inhalation:**

LC50/rat: > 2.240 mg/l / 1 h

Moderately toxic.

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### 12. Ecological information

**Environmental toxicity**

**Acute and prolonged toxicity to fish:**

static

zebra fish/LC50 (24 h): > 500 mg/l

Practically nontoxic.

**Acute toxicity to aquatic invertebrates:**

Daphnia magna/EC50 (24 h): > 500 mg/l

Practically nontoxic.

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### 13. Disposal considerations

**Waste disposal of substance:**

# Safety data sheet

## ELASTOSPRAY<sup>®</sup> 8000A ISOCYANATE

Revision date : 2008/03/17

Version: 5.6

Page: 6/7

(30232235/MDS\_GEN\_US/EN)

Incinerate or dispose of in a licensed facility.  
Do not discharge substance/product into sewer system.

### Container disposal:

#### DRUMS:

Steel drums must be emptied and can be sent to a licensed drum reconditioner for reuse, a scrap metal dealer or an approved landfill. Refer to 40 CFR § 261.7 (residues of hazardous waste in empty containers). Check with reconditioner to determine if decontamination is required. Decontaminate containers prior to disposal. Recommend crushing, puncturing or other means to prevent unauthorized use of used containers.

## 14. Transport information

### Land transport

USDOT

Not classified as a dangerous good under transport regulations

### Sea transport

IMDG

Not classified as a dangerous good under transport regulations

### Air transport

IATA/ICAO

Not classified as a dangerous good under transport regulations

## 15. Regulatory information

### Federal Regulations

#### Registration status:

TSCA, US released / listed

TSCA 12B released / listed

**OSHA hazard category:** ACGIH TLV established, Highly toxic - inhalation, Chronic target organ effects reported, Skin and/or eye irritant, Acute target organ effects reported, Sensitizer, OSHA PEL established

#### CERCLA RQ

5000 LBS

#### CAS Number

101-68-8

#### Chemical name

Diphenylmethane-4,4'-diisocyanate (MDI)

**SARA hazard categories (EPCRA 311/312):** Acute, Chronic

#### SARA 313:

#### CAS Number

#### Chemical name

Diisocyanates Compound Category

### State regulations

#### State RTK

#### CAS Number

101-68-8

9016-87-9

#### Chemical name

Diphenylmethane-4,4'-diisocyanate (MDI)

P-MDI

#### State RTK

MA, NJ, PA

NJ

# Safety data sheet

## ELASTOSPRAY® 8000A ISOCYANATE

Revision date : 2008/03/17

Version: 5.6

Page: 7/7

(30232235/MDS\_GEN\_US/EN)

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### 16. Other information

#### HMIS III rating

Health: 2 $\square$       Flammability: 1      Physical hazard: 1

HMIS uses a numbering scale ranging from 0 to 4 to indicate the degree of hazard. A value of zero means that the substance possesses essentially no hazard; a rating of four indicates high hazard.

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#### Local contact information

1-800-888-3342

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