

# Safety Data Sheet

Revision Date 01.14.2015

Revision: 1

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

### 1.1 Product identifier

Trade name: Armor-Hard Extreme

Article number: Armor-Hard Extreme Part C

### 1.2 Application of the substance / the mixture: Epoxy aggregate filler

### 1.3 Details of the supplier of the Safety Data Sheet

Manufacturer/Supplier:

Metzger/McGuire Co.

P. O. Box 2217

Concord, NH 03302

Telephone: (800) 223-6680

### 1.4 Emergency telephone number:

(800) 255-3924 24 hrs. (Continental U.S.)

(813) 248-0585 24 hrs. (Outside Continental U.S.)

## 2 Hazards identification

### 2.1 GHS Classification of the substance or mixture

Category 1A Carcinogen

Category 1 Specific Target Organ Toxicity (STOT) following repeated exposures

Category 2B Eye Irritation

### 2.2 GHS Label elements

#### Hazard pictograms/symbols



Signal word: Danger

#### Hazard statements:

H320: Causes eye irritation

H372: Causes damage to lungs, kidneys and autoimmune system through prolonged or repeated exposure by inhalation.

H350: May cause cancer by inhalation

#### Precautionary Statements:

P202: Do not handle until all safety precautions have been read and understood.

P260: Do not breathe dust.

P264: Wash hands thoroughly after handling.

P270: Do not eat, drink or smoke when using this product.

P281: Use personal protective equipment as required.

P305+P351+P338 :IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

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P308+P313 :IF exposed or concerned: Get medical advice/attention.

## Additional information:

Avoid creating dust when handling, using or storing. Use with adequate ventilation to keep exposure below recommended exposure limits.

Wear eye protection and respiratory protection following this SDS, NIOSH guidelines and other applicable regulations.

Dispose of contents/container in accordance with local, regional, national or international regulations

Please refer to Section 11 for details of specific health effects of crystalline silica.

## 3 Composition/information on ingredients

### 3.2 Mixture

**Description:** Substance listed below with potential nonhazardous additions.

#### Dangerous components:

CAS: 14808-60-7	Silica, Quartz, SiO <sub>2</sub>	50-100%
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## 4 First aid measures

### 4.1 Description of first aid measures

**After inhalation:** If gross inhalation of silica occurs, remove the person to fresh air, perform artificial respiration as needed and obtain medical attention as needed.

#### After skin contact:

If abrasion occurs wash with soap and water and seek medical attention if irritation persists or develops later.

#### After eye contact:

Immediately wash the eye with plenty of water for at least 15 minutes, while holding eyelid(s) open. If irritation persists, seek medical attention.

#### After ingestion:

If gastrointestinal discomfort occurs, give a large quantity of water. Never attempt to make an unconscious person drink or vomit. Seek medical attention.

### 4.2 Most important symptoms and effects, both acute and delayed:

There are generally no signs or symptoms of exposure to crystalline silica (quartz). Often, chronic silicosis has no symptoms. The symptoms of chronic silicosis, if present, are shortness of breath, wheezing, cough and sputum production. The symptoms of acute silicosis which can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as 6 months, are the same as those associated with chronic silicosis; additionally, weight loss and fever may also occur. The symptoms of scleroderma, an autoimmune disease, include thickening and stiffness of the skin, particularly in the fingers, shortness of breath, difficulty swallowing and joint problems.

### 4.3 Indication of any immediate medical attention and special treatment needed:

No information.

## 5 Firefighting measures

**5.1 Extinguishing Media:** Compatible with all media; use the medium appropriate to the surrounding fire.

**Unusual Fire and Explosion Habits:** None known.

**Special Fire Fighting Procedures:** None known.

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**Hazardous Combustion Products:** None known.

## 6 Accidental release measures

Wear appropriate personal protective equipment. Ensure appropriate respirators are worn during and following clean up or whenever airborne dust is present to ensure worker exposures remain below occupational exposure limits (Refer to Section 8). Follow respiratory protection selection guidelines as described in Section 8 of this document.

Collect the material using a method that does not produce dust such as a High-Efficiency Particulate Air (HEPA) vacuum or thoroughly wetting down the silica-containing dust before cleaning up. Place the silica-containing dust in a covered container appropriate for disposal. Dispose of the silica-containing dust according to federal, state and local regulations.

This product is not subject to the reporting requirements of Title III of SARA, 1986, and 40 CFR 372.

## 7 Handling and storage

Do not breathe dust, which may be created during the handling of this product. Do not rely on vision to determine whether respirable silica is present in the air, as it may be present without a visible cloud. Use good housekeeping procedures to prevent the accumulation of silica dust in the workplace. Avoid the creation of respirable dust.

Use adequate ventilation and dust collection equipment. Ensure that the dust collection system is adequate to reduce airborne dust levels to below the appropriate occupational exposure limits. If the airborne dust levels are above the appropriate occupational exposure limits, use respiratory protection during the establishment of engineering controls. Refer to Section 8 - Exposure Controls/Personal Protection for further information.

In accordance with OSHA's Hazard Communication Standard (29 CFR 1910.1200, 1915.99, 1917.28, 1918.90, 1926.59, 1928.21), state, and/or local right-to-know laws and regulations, familiarize your employees with this SDS and the information contained herein. Warn your employees, your customers and other third parties (in case of resale or distribution to others) of the potential health risks associated with the use of this product and train them in the appropriate use of personal protective equipment and engineering controls, which will reduce their risks of exposure.

See also ASTM International standard practice E 1132-06, "Standard Practice for Health Requirements Relating to Occupational Exposure to Respirable Crystalline Silica."

## 8 Exposure controls/personal protection

### 8.1 Control parameters

#### Exposure Limits:

Occupational Exposure Limits (respirable fraction) in air for dust containing crystalline silica (quartz):

Standard	Exposure Limit
MSHA/OSHA PEL* (8-Hour Time-Weighted Average)	10 mg/m <sup>3</sup> % SiO <sub>2</sub> +2
ACGIH TLV** (8-Hour Time-Weighted Average)	0.025 mg/m <sup>3</sup>
NIOSH REL** (10-Hour Time-Weighted Average, 40-hour work week)	0.05 mg/m <sup>3</sup>

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\* The OSHA/MSHA PEL for dust containing crystalline silica (quartz) is based on the silica content of the respirable dust sample. The OSHA/MSHA PEL for crystalline silica as tridymite and cristobalite is one-half the PEL for crystalline silica (quartz).

\*\* The ACGIH and NIOSH limits are for crystalline silica (quartz), independent of the dust concentration.

The ACGIH TLV for crystalline silica as cristobalite is equal to the TLV for crystalline silica as quartz. In 2005, ACGIH withdrew the TLV for crystalline silica as tridymite. Refer to Section 10 for thermal stability information for crystalline silica (quartz).

Occupational Exposure Limits in air for inert/nuisance dust:

Standard	Respirable Dust	Total Dust
MSHA/OSHA PEL (as Inert or Nuisance Dust)	5 mg/m <sup>3</sup>	15 mg/m <sup>3</sup>
ACGIH TLV (as Particles Not Otherwise Specified)	3 mg/m <sup>3</sup>	*10 mg/m <sup>3</sup>

Note: The limits for Inert Dust are provided as guidelines. Nuisance dust is limited to particulates not known to cause systemic injury or illness.

\* The TLV provided is for inhalable particles not otherwise specified.

California Inhalation Reference Exposure Limit (REL): The California chronic REL for respirable crystalline silica (quartz, cristobalite, tridymite) is 3 ug/m<sup>3</sup>. [Dated December 18, 2008] A chronic REL is an airborne level of a chemical at or below which no adverse health effects are anticipated in individuals indefinitely exposed to that level. [Dated 2/10/05]

## 8.2 Engineering controls

Ventilation: Use local exhaust, general ventilation or natural ventilation adequate to maintain exposures below appropriate exposure limits.

Other control measures: Respirable dust and quartz levels should be monitored regularly. Dust and quartz levels in excess of appropriate exposure limits should be reduced by all feasible engineering controls, including (but not limited to) dust suppression (wetting), ventilation, process enclosure, and enclosed employee work stations..

## 8.3 Personal protective equipment

### Respiratory protection:

Consult with OSHA regulations, Canadian CCOHS, NIOSH recommendations and other applicable regulatory agencies to determine the appropriate respiratory protection to be worn during use of this product, and use only such recommended respiratory protection equipment. Avoid breathing dust produced during the use and handling of this product. If the workplace airborne crystalline silica concentration is unknown for a given task, conduct air monitoring to determine the appropriate level of respiratory protection to be worn. Consult with a certified industrial hygienist, your insurance risk manager or the OSHA Consultative Services group for detailed information. Ensure appropriate respirators are worn during and following the task, including clean up or whenever airborne dust is present, to ensure worker exposures remain below occupational exposure limits. Provisions should be made for a respiratory protection training program (see 29 CFR 1910.134 – Respiratory Protection for minimum program requirements). See also ANSI standard Z88.2 (latest revision) "American National Standard for Respiratory Protection," 29 CFR 1910.134 and 1926.103, and 42 CFR 84.

### Hand/Skin protection:

Recommended in situations where abrasion from sand may occur.

### Eye protection:

Safety glasses with side shields should be worn as minimum protection. Dust goggles should be worn when excessively (visible) dusty conditions are present or are anticipated. There is a potential for severe eye irritation for those wearing contact lenses.

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## General Hygiene Considerations:

There are no known hazards associated with this material when used as recommended. Following the guidelines in this SDS is recognized as good industrial hygiene practice. Avoid breathing dust. Wash dust-exposed skin with soap and water before eating, drinking, smoking, and using toilet facilities.

## 9 Physical and chemical properties

### 9.1 Information on basic physical and chemical properties

#### General Information

#### Appearance

Form: Granular Solid  
Colour: Tan, Gray, Buff or Red

Odour: None

Odour threshold: None

pH: Not Applicable

Melting point/range: >1000 °C

Boiling point/range: >1000 °C

Flash point: None

Evaporation rate: No data available

Flammability (solid, gaseous): Non-combustible solid

Upper/lower flammability or explosive limit: Non-combustible solid

Vapor pressure: Not Applicable

Vapor density: Not Applicable

Relative Density at 20°C: 2.65g/cm<sup>3</sup>

Solubility in / Miscibility with  
Water: Insoluble

Partition coefficient (n-octanol/water): Not applicable

Auto/Self-ignition temperature: No data available

Decomposition temperature: No data available

Viscosity: Not applicable

## 10 Stability and reactivity

### 10.1 Reactivity

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**Reactivity:** Reactive with strong oxidizing agents

**Chemical Stability:** Stable

**Thermal Stability:** If crystalline silica (quartz) is heated to more than 870°C (1598°F), it can change to a form of crystalline silica known as tridymite, and if crystalline silica (quartz) is heated to more than 1470°C (2678°F), it can change to a form of crystalline silica known as cristobalite.

**Incompatibility:** Strong oxidizing agents, such as fluorine, chlorine trifluoride, hydrogen fluoride, oxygen difluoride, hydrogen peroxide, etc.; acetylene and ammonia.

**Hazardous Decomposition Products:** Silica will dissolve in hydrofluoric acid and produce a corrosive gas – silicon tetrafluoride.

**Hazardous Polymerization:** Not known to polymerize.

## 11 Toxicological information

**CAUTION:** Crystalline silica exists in several forms, the most common of which is quartz. Crystalline silica as tridymite and cristobalite are more fibrogenic than crystalline silica as quartz.

### Potential Health Effects:

**Primary routes(s) of exposure:** Inhalation, Skin, ingestion

#### Inhalation:

**Acute Effects:** One form of silicosis, acute silicosis, can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as 6 months. The symptoms of acute silicosis include (but are not limited to) progressive shortness of breath, fever, cough and weight loss. Acute silicosis is fatal.

**Chronic Effects:** The adverse health effects – lung disease, silicosis, cancer, autoimmune disease, tuberculosis, and nephrotoxicity -- are chronic effects.

**Eye Contact:** Crystalline silica (quartz) may cause abrasion of the cornea.

**Skin Contact:** May cause abrasion to skin.

**Ingestion:** No adverse effects expected for incidental ingestion. Ingestion of large amounts may cause gastrointestinal tract irritation.

**Medical Conditions Generally Aggravated by Exposure:** The condition of individuals with lung disease (e.g., bronchitis, emphysema, chronic obstructive pulmonary disease) can be aggravated by exposure.

#### A. SILICOSIS

The major concern is silicosis (lung disease), caused by the inhalation and retention of respirable crystalline silica dust. Silicosis can exist in several forms, chronic (or ordinary), accelerated or acute.

Chronic or Ordinary Silicosis is the most common form of silicosis and can occur after many years of exposure to levels above the occupational exposure limits for airborne respirable crystalline silica dust. It is further defined as either simple or complicated silicosis.

Simple Silicosis is characterized by lung lesions (shown as radiographic opacities) less than 1 centimeter in diameter, primarily in the upper lung zones. Often, simple silicosis is not associated with symptoms, detectable changes in lung function or disability. Simple silicosis may be progressive and may develop into complicated silicosis or progressive massive fibrosis (PMF).

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Complicated Silicosis or PMF is characterized by lung lesions (shown as radiographic opacities) greater than 1 centimeter in diameter. Although there may be no symptoms associated with complicated silicosis or PMF, the symptoms, if present, are shortness of breath, wheezing, cough and sputum production. Complicated silicosis or PMF may be associated with decreased lung function and may be disabling. Advanced complicated silicosis or PMF may lead to death. Advanced complicated silicosis or PMF can result in heart disease (cor pulmonale) secondary to the lung disease.

Accelerated Silicosis can occur with exposure to high concentrations of respirable crystalline silica over a relatively short period; the lung lesions can appear within five (5) years of the initial exposure. The progression can be rapid. Accelerated silicosis is similar to chronic or ordinary silicosis, except that the lung lesions appear earlier and the progression is more rapid.

Acute Silicosis can occur with exposures to very high concentrations of respirable crystalline silica over a very short time period, sometimes as short as a few months. The symptoms of acute silicosis include progressive shortness of breath, fever, cough and weight loss. Acute silicosis is fatal.

## B. CANCER

IARC - The International Agency for Research on Cancer ("IARC") concluded that there is "sufficient evidence in humans for the carcinogenicity of crystalline silica in the form of quartz or cristobalite", there is "sufficient evidence in experimental animals for the carcinogenicity of quartz dust" and that there is "limited evidence in experimental animals for the carcinogenicity of tridymite dust and cristobalite dust." The overall IARC evaluation was that "crystalline silica inhaled in the form of quartz or cristobalite dust is carcinogenic to humans (Group 1)." The IARC evaluation noted that not all industrial circumstances studied evidenced carcinogenicity. The monograph also stated that "Carcinogenicity may be dependent on inherent characteristics of the crystalline silica or on external factors affecting its biological activity or distribution of its polymorphs." For further information on the IARC evaluation, see IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, Volume 100C, "Silica Dust, Crystalline, in the Form of Quartz or Cristobalite" (2012).

NTP - In its Eleventh Annual Report on Carcinogens, concluded that respirable crystalline silica is known to be a human carcinogen, based on sufficient evidence of carcinogenicity from studies in humans indicating a causal relationship between exposure to respirable crystalline silica and increased lung cancer rates in workers exposed to crystalline silica dust.

OSHA - Crystalline silica is not on the OSHA carcinogen list.

## C. AUTOIMMUNE DISEASES

There is evidence that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis may be associated with the increased incidence of several autoimmune disorders, -- scleroderma, systemic lupus erythematosus, rheumatoid arthritis and diseases affecting the kidneys. For a review of the subject, the following may be consulted: (1) "Antinuclear Antibody and Rheumatoid Factor in Silica-Exposed Workers", *Arh Hig Rada Toksikol*, (60) 185-90 (2009); (2) "Occupational Exposure to Crystalline Silica and Autoimmune Disease", *Environmental Health Perspectives*, (107) Supplement 5, 793-802 (1999); (3) "Occupational Scleroderma", *Current Opinion in Rheumatology*, (11) 490-494 (1999); (4) "Connective Tissue Disease and Silicosis", *Am J Ind Med*, (35), 375-381 (1999).

## D. TUBERCULOSIS

Individuals with silicosis are at increased risk to develop pulmonary tuberculosis, if exposed to persons with tuberculosis. The following may be consulted for further information: (1) "Tuberculosis and Silicosis: Epidemiology, Diagnosis and Chemoprophylaxis", *J Bras Pneumol*, (34) 959-66 (2008); (2) *Occupational Lung Disorders*, Third Edition, Chapter 12, entitled "Silicosis and Related Diseases", Parkes, W. Raymond (1994); (3) "Risk of Pulmonary Tuberculosis Relative to Silicosis and Exposure to Silica Dust in South African Gold Miners," *Occup Environ Med*, (55) 496-502 (1998); (4) "Occupational Risk Factors for Developing Tuberculosis", *Am J Ind Med*, (30) 148-154 (1996).

## E. KIDNEY DISEASE

There is evidence that exposure to respirable crystalline silica (without silicosis) or that the disease silicosis is associated with the increased incidence of kidney diseases, including end stage renal disease. For additional information on the subject, the following may be consulted: (1) "Mortality from Lung and Kidney Disease in a Cohort of North American Industrial Sand Workers: An Update", *Ann Occup Hyg*, (49) 367-73 (2005); (2) "Kidney Disease and Silicosis", *Nephron*, (85) 14-19 (2000);

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(3) "End Stage Renal Disease Among Ceramic Workers Exposed to Silica", Occup Environ Med, (56) 559-561 (1999); (4) "Kidney Disease and Arthritis in a Cohort Study of Workers Exposed to Silica", Epidemiology, (12) 405-412 (2001).

## F. NON-MALIGNANT RESPIRATORY DISEASES

NIOSH has cited the results of studies that report an association between dusts found in various mining operations and non-malignant respiratory disease, particularly among smokers, including bronchitis, emphysema, and small airways disease. NIOSH Hazard Review – Health Effects of Occupational Exposure to Respirable Crystalline Silica, published in April 2002, available from NIOSH, 4676 Columbia Parkway, Cincinnati, OH 45226,

## 12 Ecological information

Crystalline silica is not known to be ecotoxic.

## 13 Disposal considerations

### 13.1 Waste treatment methods

#### **Waste from residue/unused product:**

General: Crystalline silica may be landfilled. Material should be placed in covered containers to minimize generation of airborne dust.

#### **Contaminated packaging:**

Disposal must be made in accordance with official federal, state and local regulations.

## 14 Transport information

### **DOT**

Not dangerous goods

### **IATA**

Not dangerous goods

### **IMDG**

Not dangerous goods

### **TDG**

Not dangerous goods

## 15 Regulatory Information

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



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## OTHER US REGULATORY INFORMATION:

**OSHA:** Crystalline Silica is not listed as a carcinogen.

**SARA Title III:** This product is not subject to the reporting requirements of Title III of SARA, 1986

**TSCA.:** Crystalline silica (quartz) appears on the EPA TSCA inventory under the CAS No. 14808-60-7.

**RCRA:** Crystalline silica (quartz) is not classified as a hazardous waste under the Resource Conservation and Recovery Act, or its regulations, 40 CFR §261 et seq.

**CERCLA:** Crystalline silica (quartz) is not classified as a hazardous substance under regulations of the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA), 40 CFR §302.4

**EPCRA (Emergency Planning and Community Right to Know Act):** Crystalline silica (quartz) is not an extremely hazardous substance under regulations of the Emergency Planning and Community Right to Know Act, 40 CFR Part 355, Appendices A and B and is not a toxic chemical subject to the requirements of Section 313.

**Clean Air Act:** Crystalline silica (quartz) mined and processed by Badger Mining Corporation was not processed with or does not contain any Class I or Class II ozone depleting substances.

**FDA:** Silica is included in the list of substances that may be included in coatings used in food contact surfaces, 21 CFR §175.300(b)(3). (The FDA standard primarily applies to products containing silica used in the coatings of food contact surfaces).

**California Proposition 65:** Respirable crystalline silica (quartz) is classified as a substance known to the state of California to be a carcinogen.

**Massachusetts Toxic Use Reduction Act:** Respirable crystalline silica is considered toxic per the Massachusetts Toxic Use Reduction Act.

**Pennsylvania Worker and Community Right to Know Act:** Quartz is considered hazardous for purposes of the Act, but it is not a special hazardous substance or an environmental hazardous substance.

**15.2 Chemical Safety assessment:** A Chemical Safety Assessment has not been carried out.

## 16 Other information

This information is based on our present knowledge. However, this shall not constitute a guarantee for any specific product features and shall not establish a legally valid contractual relationship.

### Definitions of Acronyms

ACGIH: American Conference of Governmental Industrial Hygienists

ANSI: American National Standards Institute

APF: Assigned Protection Factor

California REL: California Inhalation Reference Exposure Limit

CAS: Chemical Abstracts Service

CCOHS: Canadian Centre for Occupational Health and Safety

CEPA: Canadian Environmental Protection Agency

CERCLA: Comprehensive Environmental Response, Compensation and Liability Act

CFR: US Code of Federal Regulations

CPR: Controlled Products Regulation

DHHS: Department of Health and Human Services

DSL: Domestic Substances List

EEC: European Economic Community Guidelines

EINECS: European Inventory of Existing Commercial chemical Substances

EPA: Environmental Protection Agency

EPCRA: Emergency Planning and Community Right to Know Act

FDA: Food and Drug Administration

GHS: Globally Harmonized System

HEPA: High-Efficiency Particulate Air

IARC: International Agency for Research on Cancer

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IDLH: Immediately Dangerous to Life and Health

MSHA: Mine Safety and Health Administration

NIOSH: National Institute for Occupational Safety and Health, US Department of Health and Human Services

NIOSH REL: NIOSH Recommended Exposure Limit

NPRI: National Pollutant Release Inventory

NTP: National Toxicology Program

OEL: Occupational Exposure Limit

OSHA: Occupational Safety and Health Administration, US Department of Labor

PEL: Permissible Exposure Limit

PMF: Progressive Massive Fibrosis

RCRA: Resource Conservation and Recovery Act

SARA Title III: Title III of the Superfund Amendments and Reauthorization Act, 1986

SDS: Safety Data Sheet

STOT: Specific Target Organ Toxicity

TLV: Threshold Limit Value

TSCA: Toxic Substance Control Act

TWA: Time-Weighted Average

WHMIS: Workplace Hazardous Materials Information System