INTERNATIONAL CASTING SUPPLY INC. SAFETY DATA SHEET (SDS)

1. IDENTIFICATION

Product identifier: ICS-PREMIUM, ICS-400, ICS-JEWELCAST

SDS Number: ICS-001
Product Use: Casting molds

Manufacturer: Emergency #: 514-327-6688 (during working hours)

International Casting Supply Inc.

6915 Louis Sicard

St-Leonard, QC H1P 1T6 Canada

H1P 1T6

Telephone: 514-327-6688gf

2. HAZARD(S) IDENTIFICATION

Classification:

Physical - not hazardous

Health - Carcinogenic Category 1A

Specific Target Organ Toxicity - Repeated Exposure Category 1

DANGER

May cause cancer by inhalation.

Causes damage to lungs through prolonged or repeated exposure by inhalation.

Response:

If exposed or concerned: Get medical advice.

Disposal:

Dispose of contents/containers in accordance

with national and local regulation.

PREVENTION

Obtain special instructions before use.

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

Do not breathe dust.

Do not eat, drink or smoke when using this

product.

Wear protective gloves and safety glasses or goggles.

In case of inadequate ventilation, wear respiratory protection.

3. COMPOSITION/INFORMATION ON INGREDIENTS

Components	CAS No.	Percent (%)
Silica, cristobalite	14464-46-1	>40
and quartz		
Calcium sulfate	10101-41-4 & 7778-18-9	<40

4. FIRST-AID MEASURES

Inhalation: First aid is not generally required. If further irritation develops from breathing dust, move the

Person from the overexposure and see medical attention if needed.

Skin contact: First aid is not required.

Eye contact: Wash immediately with plenty of water. Do not rub eyes. If irritation persists, seek medical attention.

Ingestion: First aid is not required.

Most important symptoms/effects, acute and delayed: Particulates may cause abrasive eye injury. Inhalation of dust may cause respiratory tract irritation. Symptoms of exposure may include cough, sore throat, nasal congestion, sneezing, wheezing and shortness of breath. Prolonged inhalation of respirable silica, cristobalite and quartz above certain concentrations may cause lung diseases, including silicosis and lung cancer.

Indication of immediate medical attention and special treatment, if necessary: Immediate medical attention is not required.

5. FIRE-FIGHTING MEASURES

Suitable (and unsuitable) extinguishing media: Use extinguishing media appropriate for surrounding fire.

Specific hazards arising from the chemical: Product is not flammable, combustible or explosive.

Special protective equipment and precautions for fire-fighters: None required.

6. ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment, and emergency procedures: Wear appropriate protective clothing and respiratory protection (see Section 8). Avoid generating airborne dust during clean-up.

Environmental precautions: No specific precautions. Report releases to regulatory authorities if required by local, provincial and federal regulations.

Methods and materials for containment and cleaning up: Avoid dry sweeping. Do not use compressed air to clean spilled sand or ground silica. Use water spraying/flushing or ventilated HEPA filter vacuum cleaning system. Wet before sweeping. Dispose of in closed containers.

7. HANDLING AND STORAGE

Precaution for safe handling:

Avoid generating dust. Do not breathe dust. Do not rely on your sight to determine if dust is in the air.

Respirable crystalline silica dust may be in the air without a visible dust cloud. Use adequate exhaust ventilation and dust collection to reduce respirable crystalline silica dust levels to below the permissible limit (*PEL*). Maintain and test ventilation and dust collection equipment. Use all available work practices to control dust exposures, such as water sprays. Practice good housekeeping. Do not permit dust to collect on walls, floors, sills, ledges, machinery, or equipment. Keep airborne dust concentrations below permissible exposure limits.

Where necessary to reduce exposures below the PEL or other applicable limit (if lower than the PEL), wear a respirator approved for silica containing dust when using, handling, storing or disposing of this product or bag. See Section 8 for further information on respirators. Do not alter the respirator. Do not use a tight-fitting respirator with facial hair such as a beard or mustache that prevents a good seal between the respirator and face. Maintain, clean, and fit test respirators in accordance with applicable standards. Wash or vacuum clothing that has become dusty.

Participate in training, exposure monitoring, and health surveillance programs to monitor any potential adverse health effects that may be caused by breathing respirable crystalline silica. The OSHA Respirable Crystalline Silica Standards; 29CFR1910.1053, 1915.1053 and 1926.1053, the OSHA Hazard Communication Standard, 29 CFR Sections 1910.1200, 1915.1200, 1917.28, 1918.90, 1926.59 and 1928.21, and state and local worker or community "right-to-know" laws and regulations should be strictly followed.

Conditions for safe storage, including any incompatibilities: Use dust collection to trap dust produced during loading and unloading. Keep containers closed and store bags to avoid accidental tearing, breaking, or bursting.

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Exposure guidelines:

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Component	OSHA PEL	ACGIH TLV	NIOSH REL
Crystalline silica (quartz,	0.05 mg/m³ TWA	0.025 mg/m³ TWA	0.05 mg/m³ TWA
cristobalite and tridymite)	(respirable dust)	(respirable dust)	(respirable dust)

If crystalline silica (quartz) is heated to more than 870°C, quartz can change to a form of crystalline silica known as tridymite; if crystalline silica (quartz) is heated to more than 1470°C, quartz can change to a form of crystalline silica known as cristobalite.

Appropriate engineering controls: Use adequate general or local exhaust ventilation to maintain concentrations in the workplace below the applicable exposure limits listed above. Refer to OSHA Standards 29CFR1910.1053, 1915.1053 and 1926.1053 for additional information.

Respiratory protection: If it is not possible to reduce airborne exposure levels to below the OSHA PEL or other applicable limit with ventilation, use the table below to assist you in selecting respirators that will reduce personal exposures to below the OSHA PEL. This table is part of the OSHA Respirator Standard 29CFR1910.134(d). Assigned protection factor (APF) means the workplace level of respiratory protection that a respirator or class of respirators is expected to provide to employees when the employer implements a continuing, effective respiratory protection program as specified by the Standard. For example, an APF of 10 means that the respirator should reduce the airborne concentration of a particulate by a factor of 10, so that if the workplace concentration of a particulate was 150 ug/m³, then a respirator with an APF of 10 should reduce the concentration of particulate to 15 ug/m³. In addition, a cartridge change-out schedule must be developed based on the concentrations in the workplace.

1. Assigned Protection Factors⁵

Type of respirator 1,2	Quarter mask	Half mask	Full facepiece	Helmet/hood	Loose-fitting facepiece
1.Air-Purifying Respirator	5	³ 10	50	, ,	
2.Powered Air-Purifying Respirator		50	1,000	4 25/1,000	25
3.Supplied-Air Respirator (SAR) or Airline Respirator Demand mode Continuous flow mode Pressure-demand or other Positive-pressure mode		10 50 . 50	50 1,000 1,000	25/1,000	25
4.Self-Contained Breathing Apparatus (SCBA) Demand mode Pressure-demand or other Positive-pressure mode (e.g., opened/closed circuit)	of the second sec	10	50 10,000	50 10,000	

Notes: ¹ Employers may select respirators assigned for use in higher workplace concentrations of a hazardous substance for use at lower concentrations of that substance, or when required respirator use is independent of concentration. ¹

- ² The assigned protection factors in Table 1 are only effective when the employer implements a continuing, effective respirator program as required by this section (29 CFR 1910.134), including training, fit testing, maintenance, and use requirements.
- * This APF category includes filtering facepieces, and half masks with elastomeric facepieces.
- The employer must have evidence provided by the respirator manufacturer that testing of these respirators demonstrates performance at a level of protection of 1,000 or greater to receive an APF of 1,000. This level of performance can best be demonstrated by performing a WPF or SWPF study or equivalent testing. Absent such testing, all other PAPRs and SARs with helmets/hoods are to be treated as loose-fitting facepiece respirators and receive an APF of 25.
- These APFs do not apply to respirators used solely for escape. For escape respirators used in association with specific substances covered by 29 CFR 1910 subpart Z, employers must refer to the appropriate substance specific standards in that subpart. Escape respirators for other IDLH atmospheres are specified by 29 CFR 1910.134 (d)(2)(ii).

Skin protection: Maintain good industrial hygiene. Protection recommended for workers suffering from dermatitis or sensitive skin.

Eye protection: Safety glasses with side shields or goggles recommended if eye contact is anticipated.

Other: None known.

9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance: White to off white dry powder

Odor: No odor

Odor threshold: Not applicable

Evaporation rate: Not applicable Boiling point: Not applicable

Melting point: Gypsum will decompose above 1425'C

to form CaO and SO2 (SiO2 melting point 1710°C)

Specific gravity: 2.32 – 2.96

Vapor pressure: Not applicable

Vapor density: Not applicable

pH: Not established

Coefficient of water/oil distribution: Not established

Solubility in water: > 0.20%

Volatile organic compound VOC (g/L): Not established

Chemical stability: Stable below 1710°C

If not, under what conditions: Not applicable

Conditions of reactivity: Not established

Conditions to avoid/Incompatible materials: Avoid strong oxidizing agents. Avoid contact with acetylene ammonia, hydrofluoric acid, magnesium, manganese trifluoride, sodium and xenon hexafluoride. Avoid generation of dust. Hazardous decomposable/combustable products: Silica will dissolve in hydrofluoric acid and produce corrosive gas, silicon tetrafluoride, Gypsum will decompose to SO2 and CaO gas when heated above 1450°C.

Hazardous polymerization: Will not occur.

11. TOXICOLOGICAL INFORMATION

Acute effects of exposure:

Inhalation: Inhalation of dust may cause respiratory tract irritation. Symptoms of exposure may include cough, sore throat, nasal congestion, sneezing, wheezing and shortness of breath.

Ingestion: Ingestion in an unlikely route of exposure. If dust is swallowed, it may irritate the mouth and throat.

Skin contact: No adverse effects are expected.

Eye contact: Particulates may cause abrasive injury.

Chronic effects: Prolonged inhalation of respirable crystalline silica may cause lung disease, silicosis, lung cancer and other effects as indicated below:

The method of exposure that can lead to the adverse health effects described below is inhalation.

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A. SILICOSIS

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 (10 to 20 or more) of Prolonged repeated inhalation of relatively low levels of 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). Complicated silicosis or PMF is characterized by lung lesions (shown as radiographic opacities) greater than 1 centimeter in diameter. Complicated silicosis or PMF symptoms, if present, are shortness of breath and cough. 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 secondary to the lung disease (cor pumonale).

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

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

B. CANCER

IARC – The International Agency for Research on Cancer ("IARC") concluded that "crystalline silica in the form of quartz or cristobalite dust is *carcinogenic to humans* (*Group 1*)". For further information on the IARC evaluation, see <u>IARC Monographs on the Evaluation of Carcinogenic Risks to Humans</u>, Volume 100C, "A Review of Human Carcinogens: Arsenic, Metals, Fibres and Dusts" (2011).

NTP classifies "Silica, Crystalline (respirable size)" as Known to be a human carcinogen.

C. AUTOIMMUNE DISEASES

Several studies have reported excess cases of several autoimmune disorders – scleroderma, systemic lupus erythematosus, rheumatoid arthritis – among silica-exposed workers.

D. TUBERCULOSIS

Individuals with silicosis are at increased risk to develop pulmonary tuberculosis, if exposed to tuberculosis bacteria. Individuals with chronic silicosis have a three-fold higher risk of contracting tuberculosis than similar individuals without silicosis.

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E. KIDNEY DISEASE

Several studies have reported excess cases of kidney diseases, including end stage renal disease, among silica exposed workers. For additional information on the subject, the following may be consulted: "Kidney Disease and Silicosis", Nephron, Volume 85, pp. 14-19 (2000).

F. NON-MALIGNANT RESPIRATORY DISEASES

The reader is referred to Section 3.5 of the NIOSH Special Hazard Review cited below for information concerning the association between exposure to crystalline silica and chronic bronchitis, emphysema and small airways disease. There are studies that disclose an association between dusts found in various mining occupations and non-malignant respiratory diseases, particularly among smokers. It is unclear whether the observed associations exist only with underlying silicosis, only among smokers, or result from exposure to mineral dusts generally (independent of the presence or absence of crystalline silica, or the level of crystalline silica in the dust).

Sources of information:

The NIOSH Hazard Review – Occupational Effects of Occupational Exposure to Respirable Crystalline Silica published in April 2002 summarizes and discusses the medical and epidemiological literature on the health risks and diseases associated with occupational exposures to respirable crystalline silica. The NIOSH Hazard Review is available from NIOSH – Publications Dissemination, 4676 Columbia Parkway, Cincinnati, OH 45226, or through the NIOSH website, www.cdc.gov/niosh/topics/silica, then click on the link "NIOSH Hazard Review: Health Effects of Occupational Exposure to Respirable Crystalline Silica" found under "Hazard Review".

For more recent review of the health effects of respirable crystalline silica; the reader may consult *Fishman's Pulmonary Diseases and Disorders*, Fourth Edition, Chapter 57. "Coal Workers' Lung Diseases and Silicosis".

The US Occupational Safety and Health Administration (OSHA) Crystalline Silica Standards 29CFR1910.1053, 1915.1053 and 1926.1053, Appendix B describes the silica related diseases and provides resources and references.

Numerical measures of toxicity:

Crystalline Silica (quartz): LD50 oral rat >22,500 mg/kg

12. ECOLOGICAL INFORMATION

Ecotoxicity: Crystalline silica (quartz) is not known to be ecotoxic.

Persistence and degradability: Silica is not degradable. Bloaccumulative potential: Silica is not bioaccumulative.

Mobility in soil: Silica is not mobile in soil. Other adverse effects: No data available.

13. DISPOSAL CONSIDERATIONS

Discard any product, residue, disposable container or liner in full compliance with national regulations.

14. TRANSPORT INFORMATION

UN number: None

UN proper shipping number: Not regulated

Transport hazard class(es): None Packing group, if applicable: None Environmental hazards: None

Transport in bulk (according to Annex II of MARPOL 73/78 and the IBC Code): Not determined

Special precautions: None known

15. REGULATORY INFORMATION

UNITED STATES (FEDERAL AND STATE)

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

RCRA: This product is not classified as a hazardous waste under the Resource Conservation and Recovery Act, or its regulations, 40 CFR §261 et seq.

<u>CERCLA</u>: 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.

Emergency Planning and Community Right to Know Act (SARA) Title III: This product contains the following chemicals subject to SARA 302 or SARA 313 reporting: None above the de minimus concentrations.

<u>Clean Air Act</u>: Crystalline silica (quartz) mined and processed by U.S. Silica Company is not processed with or does not contain any Class 1 or Class II ozone depleting substances.

<u>FDA</u>: 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)(xxvi).

<u>California Proposition 65</u>; Crystalline silica (airborne particles of respirable size) is classified as a substance known to the State of California to be a carcinogen.

California Inhalation Reference Exposure Level (REL): California established a chronic non-cancer effect REL of 3ug for silica (crystalline, respirable), A chronic REL is an airborne level of a substance at or below which no non-cancer health effects are anticipated in individuals indefinitely exposed to the substance at that level.

Massachusetts Toxic Use Reduction Act: Silica, crystalline (respirable size, <10 microns) is "toxic" for purposes of the Massachusetts Toxic Use Reduction Act.

Pennsylvania Worker Community Right to Know Act: Quartz is a hazardous substance under the Act, but it is not a special hazardous substance or an environmental hazardous substance.

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<u>Texas Commission on Environmental Quality</u>: The Texas CEQ has established chronic and acute Reference Values and short term and long term Effects Screening Levels for crystalline silica (quartz). The information can be accessed through www.tceg.texas.gov.

CANADA

Domestic Substances List: As silica is a naturally occurring substance, it is on the Canadian DSL.

16. OTHER INFORMATION

Date of preparation/revision: November 24, 2022

Hazardous Material Information System (HMIS):

Health*

Flammability 0

Physical Hazard 0

Protective Equipment E

*For further information on health effects, see Sections 2, 8 and 11 of this SDS.

National Fire Protection Association (NFPA):

Health 0 Flammability 0 Instability 0

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