

## SAFETY DATA SHEET: WOOD VENEERS

#### DISCLAIMER

This Safety Data Sheet (SDS) has been prepared by the Timber Veneer Association of Australia (TVAA) in accordance with the United Nations Globally Harmonised System of classification and labelling. The Information contained herein must not be altered, deleted or added to. The TVAA will not accept responsibility for changes made to its SDS by any other person or organisation.

#### SECTION 1: IDENTIFICATION OF THE MATERIAL

#### **Material Name:**

Wood veneers of any species or grade, dried after slicing or peeling

#### **Recommended Use:**

Bonded to a substrate to provide a wood finish

#### Suppliers:

Members of the Timber Veneer Association of Australia (TVAA) Emergency Phone Number (general information): 1300 303 982, Monday to Friday, 9:00am to 5:00pm Australian Central Standard Time.

#### **SECTION 2: HAZARDS IDENTIFICATION**

#### Wood Dust:

The main health effect relating to this product arises from prolonged exposure to fine wood dust generated by further processing. When a veneered surface is sanded, wood dust is produced which may cause irritation of the nose, throat, eyes and skin. Wood dust may also be a sensitiser, and some individuals may develop allergic dermatitis or asthma. Prolonged inhalation of wood dust increases the risk of nasal and para nasal sinus cancers.

Exposure to wood dust produced by machining veneered surfaces may result in the following health effects:

• **Swallowed:** Unlikely to occur in significant quantities.

- **Eye Contact:** Wood dust may cause temporary discomfort.
- **Skin Contact:** Wood dust may cause itching and occasionally a rash , depending on the individual and the species of veneer.
- **Inhalation:** Wood dust may irritate the throat and lungs, particularly in people with upper respiratory tract or chest complaints. A temporary asthmatic reaction may occur.
- Chronic: Repeated exposure to uncontrolled wood dust over many years increases the risk of allergies, dermatitis, asthma and/or chronic nose or throat irritation in some people. Prolonged inhalation of fine wood dust also increases the risk of nasal or para nasal sinus cancers. If the work practices described in this SDS are followed, no chronic health effects are anticipated.

#### SECTION 3: INFORMATION ON INGREDIENTS

**Core Information:** Wood veneers are produced by peeling or slicing relatively thin layers from hardwood (angiosperm) and softwood (gymnosperm) logs and billets of various species.

**Chemical Identity:** Natural wood is comprised of cellulose, hemicellulose and lignin, with traces of other chemical substances, all of which are non-hazardous in themselves, in the concentrations present in veneers.

#### **SECTION 4: FIRST AID MEASURES**

Swallowed: Drink water.

**Eye Contact:** If wearing contact lenses, remove them and flush eyes with flowing water.

Skin Contact: Wash with soap and water.

**Inhalation:** Remove to fresh air. If recovery is not rapid, seek medical help.

Advice to Doctor: Treat symptomatically. There are no likely delayed effects other than those arising from long-term exposure. Refer Section 11 for toxicological information.

Burning or smouldering veneer generates carbon dioxide and other pyrolosis products typical of burning organic material. Dry wood dust in high concentrations can be explosive. Use water or dry chemical fire extinguishers.

### SECTION 6: ACCIDENTAL RELEASE MEASURES

Not relevant to this product.

## **SECTION 7: HANDLING & STORAGE**

A build-up of dry wood dust in the air should be avoided by appropriate extraction equipment. Smoking must not be allowed where wood dust is present in the air. Veneers should be stored in well ventilated areas away from sources of heat, flames or sparks. No special transport requirements are necessary.

### SECTION 8: EXPOSURE CONTROLS/ PERSONAL PROTECTION

**Core Information:** National exposure standards for wood dust, according to Safe Work Australia:

Time Weighted Average (TWA)<sup>1</sup>: 1 mg/m3 (hardwoods). 5 mg/m3 (softwoods) Short Term Exposure Limit (STEL)<sup>2</sup>: 10 mg/m3 (softwoods)

**Engineering Controls:** Work with veneers should be carried out in such a way as to minimise the generation of wood dust. Machining should be done with equipment fitted with exhaust devices capable of removing dust at the source. Hand power tools should be fitted with dust bags. Work areas should be well ventilated and cleaned at least daily.

<sup>1</sup> Time Weighted Average (TWA) means the average airborne concentration of a particular substance when calculated over a normal eight-hour working day, for a five-day working week. <sup>2</sup> Short Term Exposure Limit (STEL) means a 15 minute TWA exposure which should not be exceeded at any time during a working day even if the eight-hour TWA average is within the TWA exposure standard. Exposures at the STEL should not be longer than 15 minutes and should not be repeated more than four times per day. There should be at least 60 minutes between successive exposures at the STEL. Wood dust should be removed by vacuum cleaning or wet sweeping. Compressed air must not be used to clear work benches or to blow dust off wood products. Electrical equipment in these areas should be dust ignition proof rated.

**Skin Protection:** Wear loose, comfortable clothing. Long sleeved shirts, trousers and work gloves should be worn if skin irritation occurs, and to minimise the risk of splinters.

**Respiratory Protection:** If wood dust exposures are not controlled when sanding veneers, a class P1 or P2 replaceable filter or disposable face piece respirator should be worn. Respirators must comply with AS/NZS 1716 and be selected, used and maintained in accordance with AS/NZS 1715.

**Eye Protection:** Safety glasses or non fogging goggles complying with AS/NZS 1337 should be worn when machining.

# SECTION 9: PHYSICAL & CHEMICAL PROPERTIES

Concentrations of small dust particles in the air can form a mixture that will explode if ignited. These concentrations usually occur in dust extraction equipment which can be destroyed unless special precautions are taken. Such an explosion can also dislodge dust deposits that may have accumulated on walls, floors and ledges which in turn can ignite causing a secondary explosion.

#### **SECTION 10: STABILITY & REACTIVITY**

Not relevant to this product.

## SECTION 11: TOXICOLOGICAL INFORMATION

**Nasal Cancer:** Studies from many different countries have identified the causative relationship between the long-term inhalation of fine wood dust and nasal cancer. This relationship was first identified in woodworkers in Buckinghamshire, England, and has been confirmed in other countries since then<sup>3</sup>. The emphasis is on small particles of air- borne dust, such as the dust produced by fine sanding the surfaces of wood products. The most important single precautionary measure is the installation of an effective dust extraction system.

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Where airborne dust cannot be avoided, inhalation of dust through the nose or mouth should be avoided by the use of face masks<sup>4</sup>.

**Dermatitis:** Dermatitis may take one of two forms – irritant dermatitis or sensitisation dermatitis. Irritant dermatitis is often associated with the sap or latex of certain trees and is therefore unlikely when handling dried veneers, although some wood dusts can produce this form of irritation. Sensitisation dermatitis is more troublesome and is usually initiated by exposure to the fine wood dust of certain timbers. If the level of contact is sufficient, pre-disposed individuals will experience an allergic reaction to the dust in question and will then be sensitised to that particular timber. On subsequent exposure to the timber's dust, the skin will react more guickly and more severely to relatively small amounts of the irritant. Mild cases will show as a slight reddening of the exposed skin with accompanying itching. More severe cases will experience a hot or burning sensation and the appearance of a rash. Preventative measures include protective clothing, designed to avoid trapping dust between clothing and skin. Thorough washing after exposure will ensure that the dust is removed as soon as is practically possible.

<sup>3</sup>Danks, R.A., Kaye, A.H., Millar, H. & Kleid, S., craniofacial resection in the management of paranasal sinus cancer, in Journal of Clinical Neuroscience 1994, 1(2):111-117 <sup>4</sup>Orsler, R.J., Health problems associated with wood processing, Building Research Establishment Information Paper IP 13/79, Buckinghamshire, June 1979

**Respiratory Irritation:** In parallel with dermatitis, respiratory irritation exists in both the primary irritant and allergenic forms. Symptoms include running nose and eyes and sneezing and, occasionally, nose bleeds. In the more extreme cases, the affected worker may experience breathing difficulties, sometimes leading to asthma-like symptoms.

## SECTION 12: ECOLOGICAL INFORMATION

Not applicable to this product.

## SECTION 13: DISPOSAL CONSIDERATIONS

Decorative wood veneers are not normally treated with preservatives and therefore there are no ecotoxicity issues related to waste handling, or special precautions for landfill or incineration.

#### **SECTION 14: TRANSPORT INFORMATION**

Veneers for export must comply with the quarantine requirements of the destination country. Otherwise there are no requirements applicable to this product.

#### **SECTION 15: REGULATORY INFORMATION**

According to Safe Work Australia's National Model Regulations for the Control of Workplace Hazardous Substances [NOHSC:1005(1994)], wood veneers in their natural form are not classified as hazardous. Handling the product without gloves may give rise to splinters.

### **SECTION 16: OTHER INFORMATION**

This revision of the TVAA Safety Data Sheet was prepared in August 2019 and replaces the previous edition of August 2017. Amendments since the previous edition are primarily editorial to ensure full compliance with the Globally Harmonised System of classification.