

DENTSPLY DYCAL CATALYST

ChemWatch Material Safety Data Sheet
Issue Date: Tue 27-Jul-2004

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

DENTSPLY DYCAL CATALYST

SYNONYMS

PRODUCT USE

Medicine

SUPPLIER

Company: Dentsply (Australia) Pty Ltd

Address:

11-21 Gilby Road
Mount Waverley
VIC, 3149
AUS

Telephone: +61 03 9538 8240

Emergency Tel: 0413 830 239

Fax: 03 9538 8260

Section 2 - HAZARDS IDENTIFICATION

STATEMENT OF HAZARDOUS NATURE

HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS.

According to the Criteria of NOHSC, and the ADG Code.

POISONS SCHEDULE

None

RISK

Irritating to respiratory system and skin.
Risk of serious damage to eyes.
Ingestion may produce health damage*.
Cumulative effects may result following exposure*.
* (limited evidence)

SAFETY

Do not breathe dust.
Take off immediately all contaminated clothing.
If you feel unwell contact Doctor or Poisons Information Centre. (Show the label if possible).

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Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
calcium hydroxide	1305-62-0	30-60

Section 4 - FIRST AID MEASURES

SWALLOWED

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- 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.
- Transport to hospital or doctor without delay.

EYE

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

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.

INHALED

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor, without delay.

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Section 4 - FIRST AID MEASURES ...

NOTES TO PHYSICIAN

Treat symptomatically.

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 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- Water spray or fog.
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves for fire only.
- Prevent, by any means available, spillage from entering drains or water

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Section 5 - FIRE FIGHTING MEASURES ...

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 to be a significant fire risk.
 - Expansion or decomposition on heating may lead to violent rupture of containers.
 - Decomposes on heating and may produce toxic fumes of carbon monoxide (CO).
 - May emit acrid smoke.
- May emit corrosive fumes.

FIRE INCOMPATIBILITY

Avoid strong acids.

Reacts with aluminium / zinc producing flammable, explosive hydrogen gas

HAZCHEM

None

Personal Protective Equipment

Glasses:
Chemical goggles.
Full face- shield.

Gloves:
1.NATURALRUBBER

Respirator:
Particulate

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable labelled container for waste disposal.

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Section 6 - ACCIDENTAL RELEASE MEASURES ...

MAJOR SPILLS

Minor hazard.

- Clear area of personnel.
- Alert Fire Brigade and tell them location and nature of hazard.
- Control personal contact by using protective equipment as required.
- Prevent spillage from entering drains or water ways.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite and place in appropriate containers for disposal.
- Wash area and prevent runoff into drains or waterways.
- If contamination of drains or waterways occurs, advise emergency services.

Personal Protective Equipment advice is contained in Section 8 of the MSDS.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Limit all unnecessary personal contact.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- When handling DO NOT eat, drink or smoke.
- Always wash hands with soap and water after handling.
- Avoid physical damage to containers.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.

SUITABLE CONTAINER

- Polyethylene or polypropylene container.
 - Packing as recommended by manufacturer
 - Check all containers are clearly labelled and free from leaks.
- DO NOT use aluminium or galvanised containers

STORAGE INCOMPATIBILITY

Avoid storage with acids and nitroparaffins.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

None assigned. Refer to individual constituents.

EXPOSURE STANDARDS FOR MIXTURE

"Worst Case" computer-aided prediction of spray/ mist or fume/ dust components and concentration:

Composite Exposure Standard for Mixture (TWA) :5 mg/m³.

Operations which produce a spray/mist or fume/dust, introduce particulates to the breathing zone.

If the breathing zone concentration of ANY of the components listed below is exceeded, "Worst Case" considerations deem the individual to be overexposed.

Component Breathing Zone ppm Breathing Zone mg/m³ Mixture Conc (%)

Component	Breathing Zone (mg/m ³)	Mixture Conc (%)
calcium hydroxide	5.0000	60.0

INGREDIENT DATA

CALCIUM HYDROXIDE:

TLV TWA: 5 mg/m³ [ACGIH]

PEL Total particulate: 15mg/m³ [OSHA Z1]

PEL Respirable fraction : 5mg/m³ [OSHA Z1]

TLV TWA: 5 mg/m³

ES TWA: 5 mg/m³

OES TWA: 5 mg/m³

In the absence of reports of adverse effects from exposure and the recognised lesser alkalinity of the alkaline earths compared with the the alkali hydroxides the relatively high value of TLV-TWA is recommended.

This value corresponds in total alkalinity to 5 mg/m³ of sodium hydroxide or 2.5 times the TLV-TWA of sodium hydroxide.

PERSONAL PROTECTION

EYE

- Chemical goggles.
- Full face shield.
- Contact lenses pose a special hazard; soft lenses may absorb irritants and all lenses concentrate them.

HANDS/FEET

Wear chemical protective gloves, eg. PVC.

Wear safety footwear or safety gumboots, eg. Rubber

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION ...

OTHER

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

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the computer-generated selection:

Substance

calcium hydroxide

NATURAL RUBBER A

NATURAL+NEOPRENE A

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

RESPIRATOR

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant.

Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half-face Respirator	Full-Face Respirator
1000	10	-AUS P	-
1000	50	-	-AUS P
5000	50	Airline *	-
5000	100	-	-2 P
10000	100	-	-3 P
	100+		Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific CHEMWATCH data (if available), or your Occupational Health and Safety Advisor.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION ...

ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in special circumstances. If risk of overexposure exists, wear approved respirator. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. Provide adequate ventilation in warehouses and enclosed storage areas.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White, paste; does not mix with water.

PHYSICAL PROPERTIES

Mixes with water.
Alkaline.

Molecular Weight: Not applicable
Melting Range (°C): Not available
Solubility in water (g/L): Miscible
pH (1% solution): Not available
Volatile Component (%vol): Not available
Relative Vapour Density (air=1): Not applicable
Lower Explosive Limit (%): Not applicable
Autoignition Temp (°C): Not applicable
State: Free-flowing Paste

Boiling Range (°C): Not available
Specific Gravity (water=1): 1.82
pH (as supplied): 11.5
Vapour Pressure (kPa): Not available
Evaporation Rate: Not available
Flash Point (°C): Not applicable
Upper Explosive Limit (%): Not applicable
Decomposition Temp (°C): Not available

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Considered an unlikely route of entry in commercial/industrial environments. If swallowed, the liquid can produce stomach upset, nausea, pain and vomiting. Vomit entering the lungs may cause chemical pneumonitis (inflammation of lungs)

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Section 11 - TOXICOLOGICAL INFORMATION ...

which can cause death.

EYE

If applied to the eyes, this material causes severe eye damage. The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

SKIN

This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition. Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. Reactions may not occur on exposure but response may be delayed with symptoms only appearing many hours later.

INHALED

The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.

CHRONIC HEALTH EFFECTS

Principal routes of exposure are by accidental skin and eye contact and by inhalation of vapours especially at higher temperatures. Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucous production.

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Not available. Refer to individual constituents.
unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances

CALCIUM HYDROXIDE:
TOXICITY
Oral (rat) LD50: 7340 mg/kg

IRRITATION
Eye (rabbit): 10 mg - SEVERE

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Section 11 - TOXICOLOGICAL INFORMATION ...

Section 12 - ECOLOGICAL INFORMATION

Section 13 - DISPOSAL CONSIDERATIONS

- 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.
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Section 14 - TRANSPORTATION INFORMATION

Shipping Name:
None
Dangerous Goods Class: None
UN/NA Number: None
ADR Number:
Packing Group: None
Labels Required:
Additional Shipping Information:
International Transport Regulations:
IMO: None

HAZCHEM

None

Section 15 - REGULATORY INFORMATION

POISONS SCHEDULE

None

Section 16 - OTHER INFORMATION

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Issue Date: Tue 27-Jul-2004
Print Date: Wed 4-Aug-2004