SAFETY DATA SHEETS

This SDS packet was issued with item: 071743525

The safety data sheets (SDS) in this packet apply to one or more components included in the items listed below. Items listed below may require one or more SDS. Please refer to invoice for specific item number(s).

071742279 071742303 071742337 071743418 071743434 071743442 071743459 071743475 071743491 071743509 071743517 071744028 078292603 078292606 078293303 078293306 078293403 078293406

DENTSPLY/International DENTSPLY/Caulk Safety Data Sheet

1. Identification				
Product Name	SDS Code Number			
JELTRATE®	508058			
Substance Identity	Date of Last Revision			
JELTRATE [®] Alginate Impression Material	09/11/12			
Manufacturer:	Address			
DENTSPLY Caulk	38 West Clarke Avenue			
	Milford DE 19963-1805			
	http://www.caulk.com http://www.dentsply.com			
Grades or Minor Variant Identities	Information Telephone Number			
Fast Set and Regular Set	(302) 422-4511 (8:00 AM – 4:30 PM Eastern Time)			
Product Use (for Canada)	Emergency Telephone Number			
Dental Alginate Impression Material	(302) 422-4511 (8:00 AM – 4:30 PM Eastern Time)			

2. Hazard(s) Identification



Danger May cause cancer by inhalation May causes damage to lungs through prolonged or repeated exposure



508058

Obtain special instructions before use. Do not handle until all safety precautions have been read and understood. Use personal protective equipment required. If exposed or concerned: Get medical attention. Store locked up. Dispose of contents/container in accordance with local regulations Wash hands thoroughly after handling. Wear protective gloves. If on skin: Wash with plenty of soap and water. If skin irritation occurs: Get medical advice/attention. Take off contaminated clothing and wash before reuse.

3. Composition/Information on Ingredients

<u>r</u>			
Hazardous Components	C.A.S. Number	Exposure Limits	%
Silicon Dioxide - Crystalline - Cristobalite	14464-46-1	0.025 mg/M^3	< than 26
Silicon Dioxide - Crystalline -Quartz	14808-60-7	0.025 mg/M^3	< than 3
Silicon Dioxide – Amorphous - Diatomaceous Earth	68855-54-9	0.1 mg/M^3	< than 35
Calcium Sulfate	10101-41-4	10 mg/M^3	< than 20
Magnesium Oxide	1309-48-4	10 mg/M^3	< than 7
Tetrasodium Pyrophosphate	7722-88-5	5 mg/M^3	< than 3

Colorant Information: Fast Set Product contains D & C Red # 30 Aluminum Lake as colorant.

Regular Set Product contains synthetic Yellow Iron Oxide as colorant.

4. First Aid Measures

Routes of	First Aid Instructions	Immediate	Delayed Effects
Exposure		Medical Attention	
Eye	Rinse opened eye for several	Not Applicable	Not Applicable
	minutes under running		
	water. If symptoms persist		
	consult physician		
Skin	Immediately wash with	Not Applicable	Not Applicable
	soap and water and rinse		

	thoroughly		
Inhalation	Supply fresh air, consult	Not Applicable	Irritation and soreness in throat and nose. In extreme exposures some congestion may occur.
	physician if symptoms		Inhalation of crystalline silica has been classified by IARC as carcinogenic for humans (Group1).
	persist		Inhalation of crystalline silica is also a known cause of silicosis, a non-cancerous lung disease
			caused by excessive exposure to crystalline silica. Respirable dust from this product may contain
			up to 26 % free crystalline silica (Cristobalite) and up to 3% crystalline silica (Quartz). As such it
			represents a risk to the respiratory system. Long term, unprotected exposure to dust levels in
			excess of the TLV or PEL may cause lung disease (silicosis).
Ingestion	If symptoms persist	Not Applicable	Low order of toxicity is expected when material is ingested.
	consult physician		
Other	Not Applicable	Not Applicable	Not Applicable
Note to Physic	cians (Treating, Testing and Mo	onitoring): Treat syn	nptomatically.

5. Fire and Explosion Data

Flashpoint Method: Not Applicable	Flammable (Explosive) Limits in Air	Autoignition Temperature:	Other: Not	
	LEL: Not Applicable UEL: Not Applicable	Not Applicable	Applicable	
Flame Propagation or Burning Rate (for	Properties Contributing to Fire Intensity: Not Applicable	le Flammability Classification:		
Solids): Not Applicable		Not Applicable		
Extinguishing Media: Not Applicable	g Media to Avoid: Water with full jet.			
Protection and Procedures for Firefighters: Firefighters should wear self-contained respiratory protective devices.				
Unusual Fire and Explosion Hazards: In common with most inorganic / organic materials, this product should be treated as a combustible dust in the finely divided				
and suspended state. No dangerous decomposition products known Product does not present an explosion hazard.				

6. Accidental Release Measures

Containment Techniques: Material is a dry fluffy powder, which is colored pale yellow or pink. Store only in the original package. Keep package tightly sealed to minimize dust generation and accumulation. The avoidance of any air contaminant is always a recommended practice. Adherence to work place ventilation standards is an assurance of general personnel health and comfort

Spill/Leak Clean-up Procedures and Equipment: Wear protective clothing and scoop up bulk material and place in a labeled plastic or metal container. Avoid gross skin contact to minimize the possibility of drying out the skin. Ensure adequate ventilation, by either natural or mechanical means to keep dust level below PEL.

Evacuation Procedures: Not Applicable

Special Instructions: Not Applicable

Reporting Requirements: Not Applicable

7. Handling and Storage

Handling Practices and Warnings: Product is intended for dental use only. Handling of this product should be by trained dental healthcare professionals only. Observe normal care for working with chemicals.

Storage Practices and Warnings: Store only in the original package. Keep package tightly sealed. Store in a dry area. Protect from exposure to direct light. Store in a cool dry area. Store away from food and beverages. Minimize dust generation and accumulation. Avoid breathing dust and contact with eyes. Return cap to canisters immediately. Close pouches immediately after use. Continue to follow all MSDS/label warnings when handling empty containers. Observe normal warehouse handling procedures. The avoidance of any air contaminant is always a recommended practice. Adherence to work place ventilation standards is an assurance of general personnel health and comfort.

8. Exposure Control / Personal Protection



Ventilation: Ensur	e adequate ventilation, by either natural or mechanical means to keep dust level below PEL.	Other Engineering Contro	ls: Not Applicable
Routes of Entry	Personal Protective Equipment (PPE) for Normal Use		PPE for Emergencies
Eye/Face	Safety Glasses		Not Applicable
Skin	The glove material has to be impermeable and resistant to the product.		Not Applicable
Inhalation	Recommended NIOSH approved nuisance dust mask. <10X PEL, use 3M 9900; <100X PEL, u H filter; <200X PEL, use MSA 01-00-06 with type C supplied air unit (continuous flow mode) sufficient natural or mechanical ventilation to keep dust level below PEL.		Not Applicable
Body Protection	Body Protection Protective work clothing such as lab coat. Not Applicable		Not Applicable
General Hygiene Considerations and Work Practices: Avoid dusting when in use. Keep away from foodstuffs, beverages and feed. Immediately remove all soiled and contaminated clothing. Wash hands before breaks and at end of work. Avoid contact with the eyes and skin. Do not eat, drink or smoke when using.			
Protective Measures During Repair and Maintenance of Contaminated Equipment: Not Applicable			
Other Protective N	Aeasures and Equipment: Not Applicable		

9. Physical and Chemical Characteristics

Appearance: Dry fluffy powder. May be colored p	Odor: Spearmint odor.	
Normal Physical State: Dry fluffy powder.		Melting Point: Not Applicable
Specific Gravity: 0.3 g/cm ³	Solubility in Water: Partially soluble	pH: Not Applicable
Vapor Pressure (mm Hg): Not Applicable	Vapor Density (AIR=1):	Evaporation Rate (Butyl Acetate =1): Not Applicable
Other: Not Applicable	· · ·	

10. Stability and Reactivity Data

Incompatibility (Materials to Avoid): Hydrofluoric Acid.		
Hazardous Products Produced During Decomposition: No dangerous decomposition products known if used according to Directions for Use. (DFU).		
Hazardous Polymerization: May Occur May Not Occur	Conditions to Avoid: None known	
Stability? Stable Unstable	Conditions to Avoid: None known	

11.Toxicological Information

Toxicity Data, Epidemiology Studies, Carcinogenicity, Neurological Effects, Genetic Effects, Reproductive Effects, or Structure Activity Data: Inhalation of crystalline silica has been classified by IARC as carcinogenic for humans (Group1). Inhalation of crystalline silica is also a known cause of silicosis, a non-cancerous lung disease caused by excessive exposure to crystalline silica. Respirable dust from this product may contain up to 26 % free crystalline silica (Cristobalite). As such it represents a risk to the respiratory system. Long term, unprotected exposure to dust levels in excess of the TLV or PEL may cause lung disease (silicosis). The dry product may irritate the skin by drying it out.

Emergency Overview: Inhalation of crystalline silica has been classified by IARC as carcinogenic for humans (Group 1). Inhalation of crystalline silica is also a known cause of silicosis, a non-cancerous lung disease caused by excessive exposure to crystalline silica. Respirable dust from this product may contain up to 26 % crystalline silica (Cristobalite) and up to 3% crystalline silica (Quartz). As such, it represents a risk to the respiratory system. Long term, unprotected exposure to dust levels in excess of the TLV or PEL may cause lung disease (silicosis).

Routes of	Signs and	Single, Repeated, or	Severity (Mild,	Acute and Chronic Health Effect(s)	Target Organ(s)
Exposure	Symptoms	Lifetime Exposure	Moderate, Severe)		· ·
Eye	Material can cause irritation.	Single	Moderate	Irritation and possible corneal damage	Not Applicable
Skin	Material may be an irritant	Single & Repeated	Moderate	Irritation or possible allergic response.	Not Applicable
Inhalation	Transitory upper respiratory irritation or eye irritation.	Single & Repeated	Moderate	Irritation and soreness in throat and nose. In extreme exposures some congestion may occur. Inhalation of crystalline silica has been classified by IARC as carcinogenic for humans (Group1). Inhalation of crystalline silica is also a known cause of silicosis, a non-cancerous lung disease caused by excessive exposure to crystalline silica. Respirable dust from this product may contain up to 26 % free crystalline silica (Cristobalite) and up to 3 % crystalline silica (Quartz). As such it represents a risk to the respiratory system. Long term, unprotected exposure to dust levels in excess of the TLV or PEL may cause lung disease (silicosis).	Lung
Ingestion	Material is probably not harmful if swallowed	Not Applicable	Mild	Low order of toxicity is expected when material is ingested.	Not Applicable
Other	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Medical Con	ditions Aggravated b	y Exposure: Open sor	es and wounds of the	e skin.	
Carcinogenio	city NTP?: Not	listed IARC mono	graphs?: Yes Group	1 OSHA regulated?: No, All components of this product are in	
compliance v	with the inventory lis	ting Requirements of t	he U. S. Toxic Subs	tances Control Act (TSCA) Chemical Substance Inventory.	
Potential Env	vironmental Effects I	Do not allow to enter se	ewers/ surface or gro	bund water.	
NFPA Hazar	d Classification Rati	ngs (Scale 0-4), Health	n = 3, Fire = 0, Reac	tivity = 0	

12.Ecological Information

Toxicity Data, Environmental Fate, Physical/Chemical Data, or other Data Supporting Environmental Hazard Statements: Water Hazard class1 (Self-assessment): slightly hazardous for water. Do not allow undiluted product or large quantities of it to reach ground water, water streams or sewage system.

13.Disposal Considerations

Regulations: Dispose of material as solid waste in a closed container. Dispose of in accordance with Federal, State and Local regulations. Vacuum clean dust with equipment fitted with a HEPA filter. Use dust suppression such as water if sweeping is necessary. Sweep up spilled material and place in closed containers for disposal.

Properties (Physical/Chemical) Affecting Disposal: Dispose of material as solid waste in a closed container.

14.Transport Information

Regulated for Shipping: No. Not Regulated	DOT Shipping Name: Not Regulated	Packing Group: Not Applicable
Do Changes in Quantities, packaging, or shipment	DOT Hazard Class: Not Applicable	UN Number: Not Applicable
method change product classification? No		

15.Regulatory Information

This product has been classified in accordance with the hazard criteria of the Globally Harmonized System of Classification and Labeling of Chemicals and the SDS contains all of the information required by the Canadian Controlled Products Regulations. U.S. Federal Regulations: CERCLA 103 Reportable Quantity: This product is not subject to CERCLA reporting requirements. Many states have more stringent release reporting requirements. Report spills required under federal, state and local regulations Section 313 Toxic Chemicals: This product contains the following chemicals subject to Annual Release Reporting Requirements Under SARA Title III, Section 313 (40 CFR 372): None Section 302 Extremely Hazardous Substances (TPQ): None EPA Toxic Substances Control Act (TSCA) Status: All of the components of this product are listed on the TSCA inventory. U.S. State Regulations: Canadian Environmental Protection Act: This product is a medical device and not subject to chemical notification requirements. European Inventory of New and Existing Chemicals Substances (EINECS): This product is a medical device and not subject to chemical notification requirements.

16.Other Information

To the best of our knowledge this product does not contain gluten, wheat grains, flaxseed, natural rubber, or natural latex. All components are synthetically produced; none are derived from animal products.

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

The attached safety data sheet covers the dangers and measures to be taken when large quantities of material are released, for example due to accidents during transport or storage by the dealer. For quantities of material typically used in clinical practice, information necessary for safe use and storage of the product is given in the DFU.

Dentsply Sirona Pty Ltd

Chernwatch: 4993-56 Version No: 5.1.1.1 Safety Data Sheet according to WHS and ADG requirements

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Dentsply Jeltrate Alginate Impression Material	
Synonyms	Not Available	
Other means of identification	Not Available	
Relevant identified uses of the substance or mixture and uses advised against		

Relevant identified uses Dental alginate impression material.

Details of the supplier of the safety data sheet

Registered company name	Dentsply Sirona Pty Ltd
Address	11-21 Gilby Road Mount Waverley VIC 3149 Australia
Telephone	1300 55 29 29
Fax	1300 55 31 31
Website	www.dentsply.com.au
Email	clientservices@dentsplysirona.com

Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	1300 55 29 29
Other emergency telephone numbers	Not Available

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

CHEMWATCH HAZARD RATINGS

	Min	Max	
Flammability	1	1	
Toxicity	2		= Minimum
Body Contact	2		= Low = Moderate
Reactivity	1		= High
Chronic	3	4 :	= Extreme

Hazard pictogram(s)

Poisons Schedule	Not Applicable	
Classification [1] Eye Irritation Category 2A, Skin Sensitizer Category 1, Germ cell mutagenicity Category 2, Carcinogenicity Category 1A, Specific target organ tox single exposure Category 3 (respiratory tract irritation), Specific target organ toxicity - repeated exposure Category 2		
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI	

Label elements



SIGNAL WORD	DANGER
Hazard statement(s)	
H319	Causes serious eye irritation.
H317	May cause an allergic skin reaction.
H341	Suspected of causing genetic defects.
H350	May cause cancer.
H335	May cause respiratory irritation.

Chemwatch Hazard Alert Code: 3 Issue Date: 27/06/2017

Print Date: 04/01/2018 S.GHS.AUS.EN

H373 May cause damage to organs through prolonged or repeated exposure.

Precautionary statement(s) Prevention		
P201 Obtain special instructions before use.		
P260	Do not breathe dust/fume/gas/mist/vapours/spray.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	

Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/attention.	
P363	Wash contaminated clothing before reuse.	
P302+P352	P302+P352 IF ON SKIN: Wash with plenty of soap and water.	
P305+P351+P338	305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	

Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
68855-54-9	<35	diatomaceous earth, flux-calcined
14464-46-1	<26	cristobalite
7778-18-9	<20	calcium sulfate
1309-48-4.	<7	magnesium oxide
14808-60-7	<3	silica crystalline - quartz
7722-88-5	<3	tetrasodium pyrophosphate
		regular set product contains colourant:
Not Available	NotSpec.	Yellow Iron Oxide
		fast set product contains colourant:
1342-90-1	NotSpec.	D&C Red No.30 Aluminium Lake

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	 If this product comes in contact with the eyes: Wash out immediately with fresh 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. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin or hair contact occurs: ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	 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.
Ingestion	 Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 FIREFIGHTING MEASURES

Issue Date: 27/06/2017 Print Date: 04/01/2018

Dentsply Jeltrate Alginate Impression Material

There is no restriction on the type of extinguisher which may be used.

• Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	• Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result		
Advice for firefighters			
Fire Fighting	 When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles. When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. 		
	 Solid which exhibits difficult combustion or is difficult to ignite. Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may bum rapidly and fiercely if ignited; once initiated larger particles up to 1400 microns diameter will contribute to the propagation of an explosion. A dust explosion may release large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people. Combustion products include: , 		
Fire/Explosion Hazard	, sulfur oxides (SOx) , silicon dioxide (SiO2) , metal oxides , other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.		
HAZCHEM	Not Applicable		

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Clean up waste regularly and abnormal spills immediately. Avoid breathing dust and contact with skin and eyes. Wear protective clothing, gloves, safety glasses and dust respirator. Use dry clean up procedures and avoid generating dust.
Major Spills	Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling	9
Safe handling	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Prevent concentration in hollows and sumps. Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions) Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame. Establish good housekeeping practices. Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.
Other information	 Store in original containers. Keep containers securely sealed. Store in a cool, dry area protected from environmental extremes. Store away from incompatible materials and foodstuff containers.
Conditions for safe storage,	including any incompatibilities
	► Polvethvlene or polvpropvlene container.

Suitable container	Polyetnylene or polypropylene container.
Suitable container	 Check all containers are clearly labelled and free from leaks.

	Calcium sulfate:
	reacts violently with reducing agents, acrolein, alcohols, chlorine trifluoride, diazomethane, ethers, fluorine, hydrazine, hydrazinium perchlorate,
	hydrogen peroxide, finely divided aluminium or magnesium, peroxyfuroic acid, red phosphorus, sodium acetylide
	sensitises most organic azides which are unstable shock- and heat- sensitive explosives
	may form explosive materials with 1,3-di(5-tetrazolyl)triazene
	is incompatible with glycidol, isopropyl chlorocarbonate, nitrosyl perchlorate, sodium borohydride
	is hygroscopic; reacts with water to form gypsum and Plaster of Paris
	Silicas:
Storage incompatibility	react with hydrofluoric acid to produce silicon tetrafluoride gas
	react with xenon hexafluoride to produce explosive xenon trioxide
	reacts exothermically with oxygen diffuoride, and explosively with chlorine trifluoride (these halogenated materials are not commonplace industrial
	materials) and other fluorine-containing compounds
	may react with fluorine, chlorates
	are incompatible with strong oxidisers, manganese trioxide, chlorine trioxide, strong alkalis, metal oxides, concentrated orthophosphoric acid, vinyl
	acetate
	may react vigorously when heated with alkali carbonates.
	Avoid reaction with oxidising agents

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

1

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA						
Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	cristobalite	Cristobalite (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	cristobalite	Cristobalite (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	calcium sulfate	Calcium sulphate	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	magnesium oxide	Magnesium oxide (fume)	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Silica - Crystalline	Not Available	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Quartz (respirable dust)	0.1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	tetrasodium pyrophosphate	Tetrasodium pyrophosphate	5 mg/m3	Not Available	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	Material name		TEEL-1	TEEL-2	TEEL-3
cristobalite	Cristobalite		0.075 mg/m3	33 mg/m3	200 mg/m3
calcium sulfate	Calcium(II) sulfate dihydrate (1:1:2)		30 mg/m3	330 mg/m3	2,000 mg/m3
calcium sulfate	Calcium sulfate anhydrous; (Drierite; Gypsum; Plaster of Paris)		30 mg/m3	330 mg/m3	2,000 mg/m3
magnesium oxide	Magnesium oxide		30 mg/m3	120 mg/m3	730 mg/m3
silica crystalline - quartz	Silica, crystalline-quartz; (Silicon dioxide)		0.075 mg/m3	33 mg/m3	200 mg/m3
tetrasodium pyrophosphate	Sodium pyrophosphate decahydrate		8.6 mg/m3	96 mg/m3	580 mg/m3
tetrasodium pyrophosphate	Tetrasodium pyrophosphate		15 mg/m3	130 mg/m3	790 mg/m3
Ingredient	Original IDLH	Revised	IDLH		
diatomaceous earth, flux-calcined	Not Available	Not Avai	able		
cristobalite	25 mg/m3	Not Avai	able		
calcium sulfate	Not Available	Not Avai	able		
magnesium oxide	750 mg/m3	Not Avai	able		
silica crystalline - quartz	Not Available	Not Avai	able		
tetrasodium pyrophosphate	Not Available	Not Avai	able		
Yellow Iron Oxide	Not Available	Not Avai	able		
D&C Red No.30 Aluminium Lake	Not Available	Not Avai	able		

Exposure controls

Appropriate engineering controls	Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment.
Personal protection	
Eye and face protection	 Safety glasses with side shields. Chemical goggles. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task.

Skin protection	See Hand protection below
Hands/feet protection	The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.
Body protection	See Other protection below
Other protection	 Overalls. P.V.C. apron. Barrier cream.
Thermal hazards	Not Available

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

If inhalation risk above the TLV exists, wear approved dust respirator.

Use respirators with protection factors appropriate for the exposure level.

- ▶ Up to 5 X TLV, use valveless mask type; up to 10 X TLV, use 1/2 mask dust respirator
- Up to 50 X TLV, use full face dust respirator or demand type C air supplied respirator
- Up to 500 X TLV, use powered air-purifying dust respirator or a Type C pressure demand supplied-air respirator
- Over 500 X TLV wear full-face self-contained breathing apparatus with positive pressure mode or a combination respirator with a Type C positive pressure supplied-air full-face respirator and an auxiliary self-contained breathing apparatus operated in pressure demand or other positive pressure mode
- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.

The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).

Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.

> Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.

Use approved positive flow mask if significant quantities of dust becomes airborne.

Try to avoid creating dust conditions.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Dry fluffy, may be coloured pale yellow or pink, powder with	h a spearmint odour; partly mixes with wa	ter.
Physical state	Divided Solid	Relative density (Water = 1)	0.3
Filysical state			0.5
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Available	Decomposition temperature	Not Applicable
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water (g/L)	Partly miscible	pH as a solution (1%)	Not Available

Vapour density (Air = 1) Not Applicable

VOC g/L

Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	The material can cause respiratory irritation in some persons. The body's res Inhalation of dusts, generated by the material during the course of normal han Persons with impaired respiratory function, airway diseases and conditions su excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney individuals who may be exposed to further risk if handling and use of the mate in excessive exposures. Effects on lungs are significantly enhanced in the presence of respirable part Acute silicosis occurs under conditions of extremely high silica dust exposure progressive and spreads widely through the lungs within months of the initial e	dling, may be damaging to the health of the individual. uch as emphysema or chronic bronchitis, may incur further disability if a damage has been sustained, proper screenings should be conducted on rial result ticles. a particularly when the particle size of the dust is small. The disease is rapidly
Ingestion	The material has NOT been classified by EC Directives or other classification corroborating animal or human evidence. Not normally a hazard due to the physical form of product. The material is a p	
Skin Contact	as "Stone" was a special form of calcium sulfate hemihydrate containing alpha Beta-hemihydrate (normal Plaster of Paris) does not cause skin burns in sim Irritation and skin reactions are possible with sensitive skin Open cuts, abraded or irritated skin should not be exposed to this material	
Eye	This material can cause eye irritation and damage in some persons.	
Chronic	Long-term exposure to respiratory irritants may result in airways disease, invol Harmful: danger of serious damage to health by prolonged exposure through This material can cause serious damage if one is exposed to it for long period defects. Substance accumulation, in the human body, may occur and may cause some There has been some concern that this material can cause cancer or mutatior In a case of chronic abuse of magnesium citrate, symptoms seen included tire Blood tests revealed extremely high levels of magnesium, and the patient was followed. A patient with normal kidney function developed stoppage of breathing and sk Crystalline silicas activate the inflammatory response of white blood cells after reduces lung capacity and predisposes to chest infections. Overexposure to the breathable dust may cause coughing, wheezing, difficulty decreased vital lung capacity and chest infections. Repeated exposures in the as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, i particles less than 0.5 microns (1/50000 inch) are present. Amorphous silicas generally are less hazardous than crystalline silicosis, a disabili	inhalation. Is. It can be assumed that it contains a substance which can produce severe concern following repeated or long-term occupational exposure. Is but there is not enough data to make an assessment. Is should be assumed to be a substance which did not respond to treatment. found to have a perforated ulcer of the duodenum. Kidney failure and death ow heart rate after receiving 90 grams of magnesium sulfate over 18 hours. If they injure the lung epithelium. Chronic exposure to crystalline silicas Is preathing and impaired lung function. Chronic symptoms may include workplace to high levels of fine-divided dusts may produce a condition known irrespective of the effect. This is particularly true when a significant number of the former can be converted to the latter on heating and subsequent cooling.
Dentsply Jeltrate Alginate Impression Material	TOXICITY Not Available	IRRITATION Not Available
diatomaceous earth, flux-calcined	TOXICITY Oral (rat) LD50: >2000 mg/kg ^[1]	IRRITATION Not Available
cristobalite	TOXICITY Not Available	IRRITATION Not Available
calcium sulfate	TOXICITY Oral (rat) LD50: >1581 mg/kg ^[1]	IRRITATION Not Available
magnesium oxide	TOXICITY Not Available	IRRITATION Not Available

silica crystalline - quartz	TOXICITY	IRRITATION	
	Not Available	Not Available	
	TOXICITY	IRRITATION	
tetrasodium pyrophosphate	Dermal (rabbit) LD50: >300 mg/kg ^[1]	Not Available	
	Oral (rat) LD50: ~1624 mg/kg ^[1]		
	ΤΟΧΙΟΙΤΥ	IRRITATION	
Yellow Iron Oxide	Not Available	Not Available	
D&C Red No.30 Aluminium	ΤΟΧΙΟΙΤΥ	IRRITATION	
Lake	Not Available	Not Available	
Legend:	 Value obtained from Europe ECHA Registered Substances - , data extracted from RTECS - Register of Toxic Effect of chemica 		from manufacturer's SDS. Unless otherwise specified
CRISTOBALITE	Inhalation (human) TCLo: 16 mppcf*/8H/17.9y-I * Millions of part	ticles per cubic foot	
CALCIUM SULFATE	Gypsum (calcium sulfate dehydrate) irritates the skin, eye, mucou Poland reported chronic, non-specific airways diseases. Repeat dose toxicity: Examination of workers at a gypsum manu exposed to gypsum dust. Synergistic/antagonistic effects: Gypsum appears to be protectiv	facturing plant found restrictive de	efects on long-function tests in those who were chronica
	The following information refers to contact allergens as a group		
MAGNESIUM OXIDE	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions.	a, more rarely as urticaria or Quir	ncke's oedema. The pathogenesis of contact eczema
MAGNESIUM OXIDE Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev	ncke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev ng, and the lack of minimal lymph	ncke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testin	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends. r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev g, and the lack of minimal lymph arch. GAS) dust, it dissolves in the lung julation in the body. Following abs	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH,	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev ng, and the lack of minimal lymph arch. GAS) dust, it dissolves in the lung ulation in the body. Following ab- to be broken down (metabolised	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH, FLUX-CALCINED CRISTOBALITE & SILICA	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive ainways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum without modification in animals and humans. SAS is not expected	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a re- ng, and the lack of minimal lymph arch. SAS) dust, it dissolves in the lung iulation in the body. Following ab- to be broken down (metabolised been classified by the IARC as the lassified occupational exposures RC considered sufficient evidence balite. Crystalline silica is also kr	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH, FLUX-CALCINED CRISTOBALITE & SILICA CRISTOBALITE & SILICA	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum without modification in animals and humans. SAS is not expected WARNING: For inhalation exposure <u>ONLY</u> : This substance has The International Agency for Research on Cancer (IARC) has c carcinogenic to humans. This classification is based on what IA carcinogenicity of inhaled silica in the forms of quartz and cristo	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a re- ng, and the lack of minimal lymph arch. SAS) dust, it dissolves in the lung iulation in the body. Following ab- to be broken down (metabolised been classified by the IARC as the lassified occupational exposures RC considered sufficient evidence balite. Crystalline silica is also kr	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-media This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH, FLUX-CALCINED CRISTOBALITE & SILICA CRYSTALLINE - QUARTZ CRISTOBALITE & SILICA	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum without modification in animals and humans. SAS is not expected WARNING: For inhalation exposure <u>ONLY</u> : This substance has The International Agency for Research on Cancer (IARC) has c carcinogenic to humans . This classification is based on what IA carcinogenicity of inhaled silica in the forms of quartz and cristo Intermittent exposure produces; focal fibrosis, (pneumoconiosis)	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a re- ng, and the lack of minimal lymph arch. GAS) dust, it dissolves in the lung julation in the body. Following ab- to be broken down (metabolised) a been classified by the IARC as the lassified occupational exposures RC considered sufficient evidenci balite. Crystalline silica is also kr , cough, dyspnoea, liver tumours	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-mediat reactions, e.g. contact urticaria, involve antibody-mediat This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH, FLUX-CALCINED CRISTOBALITE & SILICA CRYSTALLINE - QUARTZ CRISTOBALITE & SILICA CRYSTALLINE - QUARTZ	Contact allergies quickly manifest themselves as contact eczem- involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum without modification in animals and humans. SAS is not expected WARNING: For inhalation exposure <u>ONLY</u> : This substance has The International Agency for Research on Cancer (IARC) has ci carcinogenic to humans. This classification is based on what IA carcinogenicity of inhaled silica in the forms of quartz and cristo Intermittent exposure produces; focal fibrosis, (pneumoconiosis)	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends. r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev g, and the lack of minimal lymph rch. GAS) dust, it dissolves in the lung iulation in the body. Following abs to be broken down (metabolised) been classified by the IARC as of lassified occupational exposures RC considered sufficient evidence balite. Crystalline silica is also kr , cough, dyspnoea, liver turmours	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-mediat reactions, e.g. contact urticaria, involve antibody-mediat This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.
Dentsply Jeltrate Alginate Impression Material & CALCIUM SULFATE & MAGNESIUM OXIDE & TETRASODIUM PYROPHOSPHATE Dentsply Jeltrate Alginate Impression Material & D&C ED NO.30 ALUMINIUM LAKE Dentsply Jeltrate Alginate Impression Material & DIATOMACEOUS EARTH, FLUX-CALCINED CRISTOBALITE & SILICA CRYSTALLINE - QUARTZ CRISTOBALITE & SILICA CRYSTALLINE - QUARTZ Acute Toxicity Skin Irritation/Corrosion	Contact allergies quickly manifest themselves as contact eczemi involves a cell-mediated (T lymphocytes) immune reaction of the immune reactions. Asthma-like symptoms may continue for months or even years af reactive airways dysfunction syndrome (RADS) which can occu RADS include the absence of previous airways disease in a non- hours of a documented exposure to the irritant. Other criteria for severe bronchial hyperreactivity on methacholine challenge testir No significant acute toxicological data identified in literature sea For silica amorphous: When experimental animals inhale synthetic amorphous silica (S majority of SAS is excreted in the faeces and there is little accum without modification in animals and humans. SAS is not expected WARNING: For inhalation exposure <u>ONLY</u> : This substance has The International Agency for Research on Cancer (IARC) has c carcinogenic to humans . This classification is based on what IA carcinogenicity of inhaled silica in the forms of quartz and cristo Intermittent exposure produces; focal fibrosis, (pneumoconiosis)	a, more rarely as urticaria or Quir delayed type. Other allergic skin ter exposure to the material ends r after exposure to high levels of atopic individual, with sudden on diagnosis of RADS include a rev g, and the lack of minimal lymph arch. GAS) dust, it dissolves in the lung iulation in the body. Following abs to be broken down (metabolised been classified by the IARC as the lassified occupational exposures RC considered sufficient evidenci balite. Crystalline silica is also kr , cough, dyspnoea, liver tumours Carcinogenicity Reproductivity	Incke's oedema. The pathogenesis of contact eczema reactions, e.g. contact urticaria, involve antibody-mediat reactions, e.g. contact urticaria, involve antibody-mediat This may be due to a non-allergic condition known as highly irritating compound. Main criteria for diagnosing set of persistent asthma-like symptoms within minutes to rersible airflow pattern on lung function tests, moderate ocytic inflammation, without eosinophilia.

Data available to make classification

S − Data Not Available to make classification

SECTION 12 ECOLOGICAL INFORMATION

ticity				
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE SOURCE
Dentsply Jeltrate Alginate Impression Material	Not Available	Not Available	Not Available	Not Not Available Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE SOURCE
diatomaceous earth, flux-calcined	Not Available	Not Available	Not Available	Not Not Available Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE SOURCE
cristobalite		•		

	Not Available	Not Available	Not Available		Not Available	Not Available
	ENDPOINT	TEST DURATION (HR)	SPECIES	VAL	.UE	SOURCE
	LC50	96	Fish	>19	70mg/L	4
calcium sulfate	EC50	96	Algae or other aquatic plants	320	0mg/L	4
	EC0	96	Crustacea	=12	55.000mg/L	1
	NOEC	504	Crustacea	360	mg/L	4
	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE	SOURCE
magnesium oxide	Not Available	Not Available	Not Available		Not Available	Not Available
silica crystalline - quartz	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE	SOURCE
	Not Available	Not Available	Not Available		Not Available	Not Available
tetrasodium pyrophosphate	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE	SOURCE
	LC50	96	Fish		1380mg/L	4
	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE	SOURCI
Yellow Iron Oxide	Not Available	Not Available	Not Available		Not Available	Not Available
D&C Red No.30 Aluminium Lake	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE	SOURCE
	Not Available	Not Available	Not Available		Not Available	Not Available
Legend:	(QSAR) - Aquai		Registered Substances - Ecotoxicological Informati cotox database - Aquatic Toxicity Data 5. ECETOC			

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
calcium sulfate	HIGH	HIGH
tetrasodium pyrophosphate	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
calcium sulfate	LOW (LogKOW = -2.2002)
tetrasodium pyrophosphate	LOW (LogKOW = -1.7388)

Mobility in soil

Ingredient	Mobility
calcium sulfate	LOW (KOC = 6.124)
tetrasodium pyrophosphate	LOW (KOC = 7.883)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal	 Recycle wherever possible. Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material) Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
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SECTION 14 TRANSPORT INFORMATION

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

	(DOD) NOT DEOLU		
Air transport (ICAO-IAIA	/ DGR): NOT REGUL	AIED FOR TRANSPORT	OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

SECTION 15 REGULATORY INFORMATION

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

DIATOMACEOUS EARTH, FLUX-CALCINED(68855-54-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

 CRISTOBALITE(14464-46-1) IS FOUND ON THE FOLLOWING REGULATORY LISTS

 Australia Exposure Standards
 Australia Inventory of Chemical Substances (AICS)

 Australia Hazardous Substances Information System - Consolidated Lists
 Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead) requiring health monitoring

 CALCIUM SULFATE(7778-18-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS
 Australia Inventory of Chemical Substances (AICS)

 Australia Exposure Standards
 Australia Inventory of Chemical Substances (AICS)

 MAGNESIUM OXIDE(1309-48-4.) IS FOUND ON THE FOLLOWING REGULATORY LISTS
 Australia Inventory of Chemical Substances (AICS)

 Australia Exposure Standards
 Australia Inventory of Chemical Substances (AICS)

 Australia Exposure Standards
 Australia Inventory of Chemical Substances (AICS)

 Australia Hazardous Substances Information System - Consolidated Lists
 Australia Inventory of Chemical Substances (AICS)

Monographs

Australia Inventory of Chemical Substances (AICS)

Australia Inventory of Chemical Substances (AICS)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC

SILICA CRYSTALLINE - QUARTZ(14808-60-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards Australia Hazardous Substances Information System - Consolidated Lists

TETRASODIUM PYROPHOSPHATE(7722-88-5) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards

Australia Hazardous Substances Information System - Consolidated Lists

YELLOW IRON OXIDE(NOT APPLICABLE) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Not Applicable

D&C RED NO.30 ALUMINIUM LAKE(1342-90-1) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Not Applicable

National Inventory	Status
Australia - AICS	N (D&C Red No.30 Aluminium Lake)
Canada - DSL	N (D&C Red No.30 Aluminium Lake)
Canada - NDSL	N (silica crystalline - quartz; diatomaceous earth, flux-calcined; tetrasodium pyrophosphate; cristobalite; magnesium oxide; calcium sulfate; D&C Red No.30 Aluminium Lake)
China - IECSC	N (D&C Red No.30 Aluminium Lake)
Europe - EINEC / ELINCS / NLP	N (D&C Red No.30 Aluminium Lake)
Japan - ENCS	N (diatomaceous earth, flux-calcined; tetrasodium pyrophosphate; D&C Red No.30 Aluminium Lake)
Korea - KECI	N (D&C Red No.30 Aluminium Lake)
New Zealand - NZIoC	N (D&C Red No.30 Aluminium Lake)
Philippines - PICCS	N (D&C Red No.30 Aluminium Lake)
USA - TSCA	N (D&C Red No.30 Aluminium Lake)
Legend:	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Other information

Ingredients with multiple cas numbers

Name	CAS No
calcium sulfate	7778-18-9, 10101-41-4, 14798-04-0
silica crystalline - quartz	14808-60-7, 122304-48-7, 122304-49-8, 12425-26-2, 1317-79-9, 70594-95-5, 87347-84-0, 308075-07-2
tetrasodium pyrophosphate	7722-88-5, 13472-36-1

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value

BCF: BioConcentration Factors BEI: Biological Exposure Index

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