

## **SAFETY DATA SHEETS**

**This SDS packet was issued with item:**

076207039

**The safety data sheets (SDS) in this packet apply to the individual products listed below. Please refer to invoice for specific item number(s).**

076207005 076207013 076207021 076207047 076207054 076207062 076209902 076209910 076209928 076209936

076209944 076209951 076209969



## seT Capsules and seT PP Syringes

### SDI Limited

Version No: 5.1.1.1

Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

Issue Date: 18/03/2016

Print Date: 31/03/2016

Initial Date: Not Available

L.GHS.USA.EN

## SECTION 1 IDENTIFICATION

### Product Identifier

Product name	seT Capsules and seT PP Syringes
Synonyms	Not Available
Other means of identification	Not Available

### Recommended use of the chemical and restrictions on use

Relevant identified uses	Professional dental use: Cementing of composite, ceramic and metallic indirect restorations.
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### Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party

Registered company name	SDI Limited	SDI Brazil Industria E Comercio Ltda	SDI Germany GmbH
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### Emergency phone number

Association / Organisation	SDI Limited	Not Available	Not Available
Emergency telephone numbers	+61 3 8727 7111	Not Available	Not Available
Other emergency telephone numbers	ray.cahill@sdi.com.au	Not Available	Not Available

Association / Organisation	Not Available
Emergency telephone numbers	+61 3 8727 7111
Other emergency telephone numbers	Not Available

## SECTION 2 HAZARD(S) IDENTIFICATION

### Classification of the substance or mixture

NFPA 704 diamond



Note: The hazard category numbers found in GHS classification in section 2 of this SDSs are NOT to be used to fill in the NFPA 704 diamond. Blue = Health Red = Fire Yellow = Reactivity White = Special (Oxidizer or water reactive substances)



Classification	Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)
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### Label elements

Obtained by Global Safety Management, www.globalsafety.net.com, (877) 683-7460

Continued...

## seT Capsules and seT PP Syringes

GHS label elements	 
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## SIGNAL WORD

**DANGER**

## Hazard statement(s)

H315	Causes skin irritation.
H318	Causes serious eye damage.
H335	May cause respiratory irritation.

## Hazard(s) not otherwise specified

Not Applicable

## Precautionary statement(s) Prevention

P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.

## Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER or doctor/physician.
P362	Take off contaminated clothing and wash before reuse.
P302+P352	IF ON SKIN: Wash with plenty of soap and water.
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
P332+P313	If skin irritation occurs: Get medical advice/attention.

## 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
Not Available	60-70	fluoroaluminosilicate glass
72869-86-4	<20	<u>diurethane dimethacrylate</u>
Not Available	<20	acidic monomer
10373-78-1	<1	<u>camphorquinone</u>

The specific chemical identity and/or exact percentage (concentration) of composition has been withheld as a trade secret.

## SECTION 4 FIRST-AID MEASURES

## Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>▶ 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.</li> <li>▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> <li>▶ Transport to hospital or doctor without delay.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
Inhalation	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Seek medical attention.</li> </ul>

## seT Capsules and seT PP Syringes

## Ingestion

- ▶ 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.
- ▶ Seek medical advice.

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

See Section 11

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

Treat symptomatically.

## SECTION 5 FIRE-FIGHTING MEASURES

## Extinguishing media

Foam is generally ineffective.

## 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

## Special protective equipment and precautions for fire-fighters

## Fire Fighting

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- ▶ May be violently or explosively reactive.
- ▶ Wear full body protective clothing with breathing apparatus.
- ▶ Prevent, by any means available, spillage from entering drains or water course.
- ▶ Fight fire from a safe distance, with adequate cover.
- ▶ If safe, switch off electrical equipment until vapour fire hazard removed.
- ▶ Use water delivered as a fine spray to control the fire and cool adjacent area.
- ▶ Avoid spraying water onto liquid pools.
- ▶ **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.

## Fire/Explosion Hazard

- ▶ Combustible.
  - ▶ Slight fire hazard when exposed to heat or flame.
  - ▶ Heating may cause expansion or decomposition leading to violent rupture of containers.
  - ▶ On combustion, may emit toxic fumes of carbon monoxide (CO).
  - ▶ May emit acid smoke.
  - ▶ Mists containing combustible materials may be explosive.
- Combustion products include; carbon dioxide (CO<sub>2</sub>) other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.

## SECTION 6 ACCIDENTAL RELEASE MEASURES

## Personal precautions, protective equipment and emergency procedures

## Minor Spills

- ▶ Remove all ignition sources.
- ▶ Clean up all spills immediately.
- ▶ Avoid breathing vapours and contact with skin and eyes.
- ▶ Control personal contact with the substance, 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.

## Major Spills

- Moderate hazard.
- ▶ Clear area of personnel and move upwind.
  - ▶ Alert Fire Brigade and tell them location and nature of hazard.
  - ▶ Wear breathing apparatus plus protective gloves.
  - ▶ Prevent, by any means available, spillage from entering drains or water course.
  - ▶ No smoking, naked lights or ignition sources.
  - ▶ Increase ventilation.
  - ▶ Stop leak if safe to do so.
  - ▶ Contain spill with sand, earth or vermiculite.
  - ▶ Collect recoverable product into labelled containers for recycling.
  - ▶ Absorb remaining product with sand, earth or vermiculite.
  - ▶ Collect solid residues and seal in labelled drums for disposal.
  - ▶ Wash area and prevent runoff into drains.
  - ▶ If contamination of drains or waterways occurs, advise emergency services.

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

## SECTION 7 HANDLING AND STORAGE






## Precautions for safe handling

## 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.
- ▶ **DO NOT enter confined spaces until atmosphere has been checked.**
- ▶ Avoid smoking, naked lights or ignition sources.



## seT Capsules and seT PP Syringes

<b>Personal protection</b>	    
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>▶ Safety glasses with side shields.</li> <li>▶ Chemical goggles.</li> <li>▶ 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. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]</li> </ul>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<ul style="list-style-type: none"> <li>▶ Wear chemical protective gloves, e.g. PVC.</li> <li>▶ Wear safety footwear or safety gumboots, e.g. Rubber</li> <li>▶ Rubber Gloves</li> </ul>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<ul style="list-style-type: none"> <li>▶ Overalls.</li> <li>▶ P.V.C. apron.</li> <li>▶ Barrier cream.</li> <li>▶ Skin cleansing cream.</li> <li>▶ Eye wash unit.</li> </ul>
<b>Thermal hazards</b>	Not Available

**Respiratory protection**

Type A Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS	-	A-PAPR-AUS / Class 1
up to 50 x ES	-	A-AUS / Class 1	-
up to 100 x ES	-	A-2	A-PAPR-2 ^

^ - Full-face

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(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

**SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES****Information on basic physical and chemical properties**

<b>Appearance</b>	Slightly yellow liquid with slight characteristic odour, does not mix with water.		
<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	2.0
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Available	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Available
<b>Initial boiling point and boiling range (°C)</b>	Not Available	<b>Molecular weight (g/mol)</b>	Not Applicable
<b>Flash point (°C)</b>	Not Available	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Available	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Available	<b>Oxidising properties</b>	Not Available
<b>Upper Explosive Limit (%)</b>	Not Available	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Available
<b>Lower Explosive Limit (%)</b>	Not Available	<b>Volatile Component (%vol)</b>	Not Available
<b>Vapour pressure (kPa)</b>	Not Available	<b>Gas group</b>	Not Available
<b>Solubility in water (g/L)</b>	Immiscible	<b>pH as a solution (1%)</b>	Not Available
<b>Vapour density (Air = 1)</b>	Not Available	<b>VOC g/L</b>	Not Available

**SECTION 10 STABILITY AND REACTIVITY**

<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>

## seT Capsules and seT PP Syringes

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	Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
Ingestion	The material has <b>NOT</b> been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.
Eye	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Chronic	Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.
seT Capsules and seT PP Syringes	<b>TOXICITY</b>
	Not Available
	<b>IRRITATION</b>
	Not Available
diurethane dimethacrylate	<b>TOXICITY</b>
	Oral (rat) LD50: >5000 mg/kg <sup>[1]</sup>
	<b>IRRITATION</b>
	Not Available
camphorquinone	<b>TOXICITY</b>
	Not Available
	<b>IRRITATION</b>
	Not Available
<b>Legend:</b>	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. * Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

<b>DIURETHANE DIMETHACRYLATE</b>	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.</p> <p>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 mucus production.</p> <p>UV (ultraviolet)/ EB (electron beam) acrylates are generally of low toxicity</p> <p>UV/EB acrylates are divided into two groups; "stenomeric" and "eurymeric" acrylates.</p> <p>The first group consists of well-defined acrylates which can be described by a simple idealised chemical; they are low molecular weight species with a very narrow weight distribution profile.</p> <p>The eurymeric acrylates cannot be described by an idealised structure and may differ fundamentally between various suppliers; they are of relatively high molecular weight and possess a wide weight distribution.</p> <p>Stenomeric acrylates are usually more hazardous than the eurymeric substances. Stenomeric acrylates are also well defined which allows comparison and exchange of toxicity data - this allows more accurate classification.</p> <p>The stenomerics cannot be classified as a group; they exhibit substantial variation.</p> <p>Where no "official" classification for acrylates and methacrylates exists, there has been cautious attempts to create classifications in the absence of contrary evidence. For example</p> <p>Monalkyl or monoarylestere of acrylic acids should be classified as R36/37/38 and R51/53</p> <p>Monoalkyl or monoaryl esters of methacrylic acid should be classified as R36/37/38</p> <p>* Possible carcinogen; possible sensitizer; possible irreversible effects * Polysciences MSDS</p>

## seT Capsules and seT PP Syringes

## CAMPHORQUINONE

The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

No significant acute toxicological data identified in literature search.

Acute Toxicity	☐	Carcinogenicity	☐
Skin Irritation/Corrosion	✓	Reproductivity	☐
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	☐
Respiratory or Skin sensitisation	☐	STOT - Repeated Exposure	☐
Mutagenicity	☐	Aspiration Hazard	☐

Legend: ✗ – Data available but does not fill the criteria for classification  
 ✓ – Data required to make classification available  
 ☐ – Data Not Available to make classification

## SECTION 12 ECOLOGICAL INFORMATION

## Toxicity

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
diurethane dimethacrylate	EC50	48	Crustacea	>1.2mg/L	2
diurethane dimethacrylate	EC50	72	Algae or other aquatic plants	>0.68mg/L	2
diurethane dimethacrylate	NOEC	72	Algae or other aquatic plants	>0.21mg/L	2
camphorquinone	EC50	384	Crustacea	53.788mg/L	3
camphorquinone	EC50	96	Algae or other aquatic plants	1054.236mg/L	3
camphorquinone	LC50	96	Fish	230.775mg/L	3

## Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

**DO NOT** discharge into sewer or waterways.

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
camphorquinone	HIGH	HIGH

## Bioaccumulative potential

Ingredient	Bioaccumulation
camphorquinone	LOW (LogKOW = 1.52)

## Mobility in soil

Ingredient	Mobility
camphorquinone	LOW (KOC = 12.6)

## SECTION 13 DISPOSAL CONSIDERATIONS

## Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> <li><b>DO NOT</b> allow wash water from cleaning or process equipment to enter drains.</li> <li>It may be necessary to collect all wash water for treatment before disposal.</li> <li>In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>Where in doubt contact the responsible authority.</li> </ul> <p>Consult State Land Waste Management Authority for disposal.          Bury residue in an authorised landfill.</p>
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## SECTION 14 TRANSPORT INFORMATION

## Labels Required

Marine Pollutant	NO
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Land transport (DOT): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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



## seT Capsules and seT PP Syringes

## 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

## DIURETHANE DIMETHACRYLATE(72869-86-4) IS FOUND ON THE FOLLOWING REGULATORY LISTS

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

## CAMPHORQUINONE(10373-78-1) IS FOUND ON THE FOLLOWING REGULATORY LISTS

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

## Federal Regulations

## Superfund Amendments and Reauthorization Act of 1986 (SARA)

## SECTION 311/312 HAZARD CATEGORIES

Immediate (acute) health hazard	YES
Delayed (chronic) health hazard	NO
Fire hazard	NO
Pressure hazard	NO
Reactivity hazard	NO

## US. EPA CERCLA HAZARDOUS SUBSTANCES AND REPORTABLE QUANTITIES (40 CFR 302.4)

None Reported

## State Regulations

## US. CALIFORNIA PROPOSITION 65

None Reported

National Inventory	Status
Australia - AICS	Y
Canada - DSL	N (diurethane dimethacrylate)
Canada - NDSL	Y
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	N (diurethane dimethacrylate; camphorquinone)
Korea - KECI	N (camphorquinone)
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
<b>Legend:</b>	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
diurethane dimethacrylate	41137-60-4, 72869-86-4
camphorquinone	10334-26-6, 10373-78-1, 2767-84-2, 465-29-2

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by SDI Limited 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.

## Definitions and abbreviations

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

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**seT Capsules and seT PP Syringes**

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TLV: Threshold Limit Value  
LOD: Limit Of Detection  
OTV: Odour Threshold Value  
BCF: BioConcentration Factors  
BEI: Biological Exposure Index

The information contained in the Safety Data Sheet is based on data considered to be accurate, however, no warranty is expressed or implied regarding the accuracy of the data or the results to be obtained from the use thereof.

**Other information:**

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Date of preparation/revision: 23rd September 2015  
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