# **Dentsply 3% Citanest with Octapressin**

# Dentsply (Australia) Pty Ltd

Chemwatch: **4625-57** Version No: **3.1.1.1** 

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: **01/01/2013** Print Date: **11/01/2017** S.GHS.AUS.EN

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

# Product Identifier Product name Dentsply 3% Citanest with Octapressin Synonyms Not Available Other means of identification Not Available

#### Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Local dental anaesthetic for use by injection.

## Details of the supplier of the safety data sheet

Registered company name	Dentsply (Australia) Pty Ltd
Address	11-21 Gilby Road Mount Waverley VIC 3149 Australia
Telephone	1300 55 29 29
Fax	+61 3 9538 8260
Website	www.dentsply.com.au
Email	clientservices@dentsply.com

#### **Emergency telephone number**

Associa	ation / Organisation	Poisons Information Centre (AUSTRALIA)
En	mergency telephone numbers	13 11 26 - AUSTRALIA (24 hour service)
Other en	mergency 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	0	1	
Toxicity	1		0 = Minimum
Body Contact	3		1 = Low 2 = Moderate
Reactivity	0		3 = High
Chronic	2		4 = Extreme

Poisons Schedule	S4
Classification [1]	Serious Eye Damage Category 1, Skin Sensitizer Category 1, Carcinogenicity Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

## Label elements

GHS label elements







SIGNAL WORD DANGER

## Hazard statement(s)

H318	Causes serious eye damage.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.

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P201	Obtain special instructions before use.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.
P261	Avoid breathing 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.	
P308+P313	IF exposed or concerned: Get medical advice/attention.	
P310	Immediately call a POISON CENTER or doctor/physician.	
P363	Wash contaminated clothing before reuse.	

#### Precautionary statement(s) Storage

## Precautionary statement(s) Disposal

P501 Dispose of contents/container in accordance with local regulations.

#### **SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS**

#### Substances

See section below for composition of Mixtures

#### **Mixtures**

CAS No	%[weight]	Name
1786-81-8	3	prilocaine hydrochloride

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

#### Description of first aid measures

Eye Contact	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 Contact	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.
Inhalation	<ul> <li>If furnes, aerosols or combustion products are inhaled remove from contaminated area.</li> <li>Other measures are usually unnecessary.</li> </ul>
Ingestion	<ul> <li>For advice, contact a Poisons Information Centre or a doctor at once.</li> <li>Urgent hospital treatment is likely to be needed.</li> <li>If swallowed do NOT induce vomiting.</li> <li>If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>Observe the patient carefully.</li> <li>Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>Transport to hospital or doctor without delay.</li> </ul>

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

Treat symptomatically.

Metabolism of amide-type anaesthetics occurs in the liver and in some cases in the kidney. Because these undergo extensive and rapid hepatic metabolism, only about 1/3 of an oral dose reaches the systemic circulation.

When systemic reaction to local anaesthetic occurs, steps should be taken to maintain circulation and respiration and control convulsions. A clear airway should be established and oxygen given together with assisted ventilation if necessary. Circulation should be maintained with plasma infusion (or suitable electrolytes). Vasopressors such as ephedrine, metaraminol and methoxamine have been suggested in marked hypotension although their use is accompanied by the risk of CNS excitement. (Vasopressors should not be given in patients receiving oxytocic drugs.) Convulsions may be controlled by the use of diazepam or short acting barbiturates such as thiopentone sodium. It should be remembered that anticonvulsant treatment may also depress respiration. A short-acting neuromuscular blocking agent, together with endotracheal intubation and artificial respiration has been used when convulsions persist.

Methaemoglobinaemia may be treated by intravenous administration of a 1% solution of methylene blue.

MARTINDALE; The Extra Pharmacopoeia, 29th Edition

Local anaesthetics produce vasodilation by blocking sympathetic nerves. Elevating the patient's legs and positioning the patient on the left side will help decrease blood pressure.

## **SECTION 5 FIREFIGHTING MEASURES**

## **Extinguishing media**

- Use extinguishing media suitable for surrounding area.
- There is no restriction on the type of extinguisher which may be used.

#### Special hazards arising from the substrate or mixture

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Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Use fire fighting procedures suitable for surrounding area.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered to be a significant fire risk.</li> <li>Expansion or decomposition on heating may lead to violent rupture of containers.</li> <li>Decomposes on heating and may produce toxic fumes of carbon monoxide (CO).</li> <li>Other decomposition products include: carbon dioxide (CO2) hydrogen chloride nitrogen oxides (NOx)</li> </ul>
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

Methous and material for	containment and cleaning up
Minor Spills	<ul> <li>Clean up all spills immediately.</li> <li>Avoid breathing vapours and contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> <li>Contain and absorb spill with sand, earth, inert material or vermiculite.</li> <li>  Take care to avoid needles and broken containers.</li> </ul>
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.    Take care to avoid needles and broken containers.

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

# **SECTION 7 HANDLING AND STORAGE**

<b>Precautions</b>	for	safe	handling
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	,
Safe handling	<ul> <li>Limit all unnecessary personal contact.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Avoid contact with incompatible materials.</li> </ul>
Other information	<ul> <li>Protect from light.</li> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry, well-ventilated area.</li> <li>Store away from incompatible materials and foodstuff containers.</li> <li>Keep cool. Store below 25 deg.C</li> </ul>

## Conditions for safe storage, including any incompatibilities

Suitable container	Packaging as recommended by manufacturer.     Check that containers are clearly labelled
Storage incompatibility	None known

# SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

## **Control parameters**

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Not Available

## **EMERGENCY LIMITS**

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
Dentsply 3% Citanest with Octapressin	Not Available	Not Available	Not Available	Not Available
Ingredient	Original IDLH		Revised IDLH	
prilocaine hydrochloride	Not Available		Not Available	

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## **Exposure controls**

# Appropriate engineering controls

Use in a well-ventilated area

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

- ▶ Wear chemical protective gloves, e.g. PVC.
- ▶ Wear safety footwear or safety gumboots, e.g. Rubber

**Body protection** 

See Other protection below

Other protection

- Overalls. ► P.V.C. apron.
- ► Barrier cream.
- Thermal hazards

Not Available

## **SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES**

#### Information on basic physical and chemical properties

Appearance	Clear, odourless liquid; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.0 (water)
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	3.3-5.5	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

## **SECTION 10 STABILITY AND REACTIVITY**

Reactivity	See section 7
Chemical stability	<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
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**

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The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational settino. Not normally a hazard due to non-volatile nature of product Inhalation of local anaesthetics may result in upper respiratory tract effects including burning sensation, stinging, tenderness, swelling, sloughing, tissue Inhaled necrosis and irritation. Systemic poisoning is characterised by lightheadedness, nervousness, apprehension, euphoria, confusion, dizziness, drowsiness, tinnitus, blurred or double vision, vomiting and sensations of heat, cold or numbness, twitching, tremors, convulsions, unconsciousness and respiratory depression and arrest. The material has NOT 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 Systemic toxicity due to local anaesthetics may be manifested by yawning, restlessness, excitement, ringing sound in the ear, nausea and vomiting. Early warning signs are numbness of the tongue and around the mouth region. Ingestion The substance and/or its metabolites may bind to haemoglobin inhibiting normal uptake of oxygen. This condition, known as "methaemoglobinemia", is a form of oxygen starvation (anoxia) Symptoms include cyanosis (a bluish discolouration skin and mucous membranes) and breathing difficulties. Symptoms may not be evident until several hours after exposure. The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use Skin Contact of the material and ensure that any external damage is suitably protected. When applied to the skin, local anaesthetics can cause burning, stinging, tendemess, redness, sloughing, blisters and tissue death. There may be skin eruptions caused by simultaneous exposure to light. If applied to the eyes, this material causes severe eye damage. Direct eye contact with local anaesthetics may reduce sensation in the eyes and increase the risk of injury due to foreign bodies. There may be drying of the Eye cornea, a burning sensation, excessive tears, sensitivity to light, swelling and redness of the conjunctiva and increased blinking. Absorption into the body can cause degeneration of the optic nerve, leading to blindness Principal routes of exposure are usually by amp;5531 Chronic Repeated or prolonged exposure with local anaesthetics may result in sensitization of skin, with the development of lesions, hives and oedema. There may be anaphylactic reactions that may cause death. TOXICITY IRRITATION **Dentsply 3% Citanest with** Octapressin Not Available Not Available TOXICITY IRRITATION prilocaine hydrochloride Not Available Not Available 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.\* Value obtained from manufacturer's SDS. Unless otherwise specified data Legend: extracted from RTECS - Register of Toxic Effect of chemical Substances 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 PRILOCAINE a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune HYDROCHLORIDE Parenteral (man) LDLo: 12.43 mg/kg/1h - I Nil reported Altered sleep-time, convulsions recorded. **Acute Toxicity** 0 Carcinogenicity 0 Skin Irritation/Corrosion 0 Reproductivity Serious Eye 0 STOT - Single Exposure Damage/Irritation Respiratory or Skin STOT - Repeated Exposure 0 sensitisation Mutagenicity 0 **Aspiration Hazard** 0

## **SECTION 12 ECOLOGICAL INFORMATION**

## Toxicity

loxicity					
Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Legend:	Aquatic Toxicity Data (Estima	xicity Data 2. Europe ECHA Registere ated) 4. US EPA, Ecotox database - A TI (Japan) - Bioconcentration Data 8.	quatic Toxicity Data 5. ECETO(		

Leaend:

DO NOT discharge into sewer or waterways

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

## Bioaccumulative potential

Ingredient Bioaccumulation
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X - Data available but does not fill the criteria for classification

Data required to make classification available
 Data Not Available to make classification

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No Data available for all ingredients

#### Mobility in soil

Ingredient	Mobility
	No Data available for all ingredients

#### **SECTION 13 DISPOSAL CONSIDERATIONS**

#### Waste treatment methods

- 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 licenced to accept chemical and / or pharmaceutical wastes or incineration in a licenced apparatus (after admixture with suitable combustible material).
- Product / Packaging
  disposal

  ▶ Decontaminate empty containers

  ▶ Containers may still present a ch
  - Containers may still present a chemical hazard/ danger when empty.
  - ▶ Return to supplier for reuse/ recycling if possible.

#### Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.

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

#### **Labels Required**

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG): 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

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

## PRILOCAINE HYDROCHLORIDE(1786-81-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

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

National Inventory

Status

Australia - AICS

Y

Canada - DSL

V

Canada - NDSL

N (prilocaine hydrochloride)

China - IECSC N (prilocaine hydrochloride) Europe - EINEC / ELINCS / Υ NLP Japan - ENCS N (prilocaine hydrochloride) N (prilocaine hydrochloride) Korea - KECI New Zealand - NZIoC Υ Philippines - PICCS N (prilocaine hydrochloride) USA - TSCA N (prilocaine hydrochloride) Y = All ingredients are on the inventory Legend:

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

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.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.ne

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.

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## **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

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

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