Waterline Testing

What to Test?

Water samples should be taken from water sources used during patient treatment: handpieces, air/water syringes, ultrasonic and/or piezo scalers, and the cuspidor cupfill.

When to Test?

Water testing should be done at the beginning of the day; after the waterlines have been flushed and the handpieces, air/water syringes, and scalers have been reattached, as per manufacturer's instructions.

How Often to Test?

Always follow waterline cleaner manufacturer's instructions for testing. E|One and E|Line recommend the following Routine Testing schedule.

Routine Testing

Quarterly

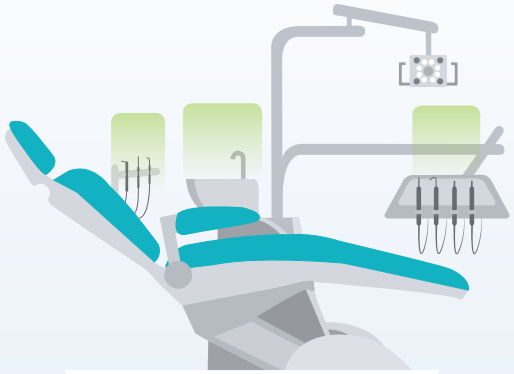
- ☑ Quarterly testing from at least one line/source from each bottle, for example the air/water syringe.
- ☑ Do not always test the same line/source. All lines/sources should be tested at least once a year.
- ☑ In addition, test the cuspidor cupfill quarterly.

Monthly

- ☑ During the warmest quarter of the year, test a line/source monthly, instead of once quarterly. In addition, test the cuspidor cupfill monthly.

"Fail" Water Test Result:

If the water test produces a "fail" result, perform a shock treatment and retest the line/source. Continue to shock and retest until the line/source produces a "pass" result. Temporarily increase the frequency of testing from quarterly to monthly for at least 3 months. After 3 consecutive months of "pass" results, return to Routine Testing.



Best Practices

- ☑ All waterlines should be purged at the beginning of each workday for at least 2 to 3 minutes. Before purging is carried out, all attachments (including handpieces, air/water syringes and ultrasonic/piezo scalers) should be removed from the waterlines.
- ☑ Any attachments with a water source (including handpieces, air/water syringes, ultrasonic/piezo scalers, endo handpieces, and implant devices) should be run for 20 to 30 seconds after patient care in order to purge all potentially contaminated air and water. The attachment should then be removed and, following cleaning and disinfection of clinical contact surfaces, another sterilized attachment is to be used with the next patient.
- ☑ Always follow manufacturer's instructions for use.
- ☑ Complete dental unit waterline care requires not only continuous waterline maintenance, but also shock treatments and monitoring.
- ☑ Do not use waterline heaters as heat encourages the growth of microorganisms.
- ☑ Use sterile saline or sterile water as a coolant/irrigant when performing surgical procedures.
- ☑ Educate and train staff on managing dental water quality.

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Complete Waterline Care

- Dental Waterline Maintenance
- Dental Waterline Shock
- Dental Waterline Monitoring

The easiest and most effective waterline collection

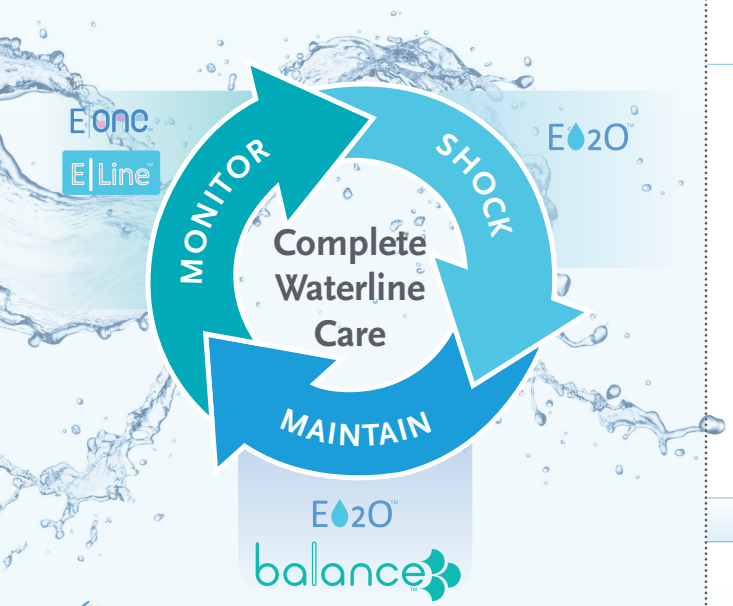
Options to meet any office's needs

GERMIPHENE®

We formulate. **We manufacture.** We test. **We export. We deliver.** We understand.
We have answers. We are Canadian. **We are 65.**[+]
WE KNOW INFECTION CONTROL!

Better Together

The key to successful dental unit waterline care is not exclusive to maintenance alone. A continuous/daily waterline treatment must be combined with routine shocking to keep waterlines free from biofilm and bacteria. Waterline testing confirms not only your water is clean and safe for use, but that your maintenance protocols and procedures are working. You can't have one without the other.



- [x] Complete waterline care ensures guidelines/ standards compliance and minimizes the risk to patients, staff and equipment.

SHOCK

- [x] Before initial use to clean out waterlines
- [x] Periodically to remove biofilm & bacteria accumulation
- [x] After a failed waterline test

MAINTAIN

- [x] Continuous daily use to prevent bacteria and biofilm growth

E2O™ | Dental Waterline Maintenance & Shock Treatment

- Safe to use, eco-friendly solution
- Biofilm & bacteria control
- No harsh chemicals
- Clear, tasteless, odourless
- No waiting for tablets to dissolve, no clogging
- For independent water bottles



A pump a day keeps the bacteria and biofilm away

	WATER BOTTLE	WATER BOTTLE
250 mL	700 mL	2 L
	166 USES	56 USES

Use the same product for daily maintenance and shock treatments

BALANCE™ | Dental Waterline Filter

- Provides 90 days (or 60 L) of treated, compliant dental unit water
- Quickly installs onto the water bottle pick-up tube
- Pretreatment included for ideal filter working conditions
- Made with friendly silver oxide
- Microbial counts well below required water quality limit of 500 cfu/mL



BALANCE KIT

4 x 90 day/ 60 L filter + 4 x Balance™ pretreatment



MONITOR



- [x] Set up a waterline testing schedule
- [x] Testing frequency is dependent on test results, water quality goals and manufacturer's instructions

Schedule & record your waterline tests online.
FREE easy to use web app available with E|One or E|Line purchase. Ask us today!

E|LINE™ | Water Quality Check Kit

- 2 Vials per test: (1) Total Bacteria + Fungi AND (2) *E. coli + faecal coliform*
- Results in 24 hours
- Dry block incubator required



E|LINE™ Vials available with incubator, with E2O, or sold separately

Total Bacteria + Fungi + *E. coli + faecal coliform* + 37° Incubator + 3 250 mL E2O™ dental waterline treatment

EASY, COLOUR CODED RESULTS

Total Bacteria + Fungi test
Test detection limit 200 cfu/mL
<200 cfu/mL ✓ ✗ >200 cfu/mL

E. coli + faecal coliform test
Test detection limit 1 cfu/mL
<1 cfu/mL ✓ ✗ >1 cfu/mL

E|ONE™ | Water Quality Indicator

- One vial tests for bacteria, biofilm & fungi
- Results in 15 minutes to 1 hour
- No incubator required



E|ONE™ SINGLE TEST KIT — 12 kits/box

Disposable Syringe + Disposable Filter + E|One™ Test Vial + Saline Water Vial

FAST, COLOUR CODED RESULTS

Test detection limit 500 cfu/mL
<500 cfu/mL ✓ ✗ >500 cfu/mL ✗ >1000 cfu/mL