

EVOQUA WATER TESTING LOG (SJ)

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|---|--|--|
| <input checked="" type="checkbox"/> St. Joseph Medical Center, Tacoma, WA | <input type="checkbox"/> St. Anthony Hospital Gig Harbor, WA | <input type="checkbox"/> Harrison Medical Center, Bremerton, WA |
| <input type="checkbox"/> St. Francis Hospital, Federal Way, WA | <input type="checkbox"/> St. Elizabeth Hospital Enumclaw, WA | <input type="checkbox"/> Harrison Medical Center, Silverdale, WA |
| <input type="checkbox"/> St. Clare Hospital Lakewood, WA | <input type="checkbox"/> Highline Medical Center Burien, WA | <input type="checkbox"/> PSC |

Water System: ELGA MEDICA R30 Site: 4316770
 Month/Year: _____

Date	Out Quality Checks Min (>15 MΩ/cm)	RO Quality (< .010 uS/cm)	Filter changes, comments, and As needed maintenance	Tech
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Monthly Check: Type 1 Water Bacterial Count (< 10 CFU/mL) Date/Tech: _____

Note: Notify MTC if RO Quality > .010 (ok to operate instruments up to .020).

EVOQUA - Phone: 1-800-466-7873, Account #: 04320 45716.

Comments/Reviewed by: _____

DOCUMENT APPROVAL Purpose of Document / Reason for Change:

Changed "Note" at bottom w/ RO values. Added Evoqua phone #. New format.

No significant change to process in above revision. Per CAP, this revision does not require further Medical Director approval.

Committee Approval Date	<input type="checkbox"/> Date: <input checked="" type="checkbox"/> N/A – revision of department-specific document which is used at only one facility	Medical Director Approval (Electronic Signature)	 9/25/15
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