

How to be Waterline Compliant

The Centers for Disease Control (CDC) Guidelines for Infection Control in Dental Health-Care Settings – 2003, supported by ProEdge, the ADA, FDA, ADS, and 40 state dental boards, provide dental healthcare professionals with a well-established scientific basis for ensuring dental water safety. These guidelines focus on three pillars and recommend specific measures for achieving and verifying safe dental water.



Surgical Water

Compliance means:

- Use of Sterile Water
- Use of Sterile Delivery System

Agency Reference:

ADA: Dental units cannot deliver sterile water, even with water bottles, because the water-bearing pathway cannot be reliably sterilized. Delivery devices (e.g., sterile bulb syringe or single-use disposable products) should be used to deliver sterile water. ¹

CDC: Defines oral surgical procedures as those that involve the incision, excision, or reflection of tissue that exposes normally sterile areas of the oral cavity. ²

Dental Unit Water

For all other procedures, dental practices should treat and test the water from dental units to ensure it meets the EPA standard for potable water (≤ 500 CFU/mL). **The following methods are acceptable and beneficial for maintaining dental water quality:**

Compliance means:

- Use of Chemical Treatments
- Use of Shock Treatments
- Use of Independent Water Reservoirs (Water Bottles)
- Flushing Waterlines

Agency Reference:

ADA, CDC, FDA, & ADS: Follow dental unit manufacturer recommendations. ¹⁻⁴

CDC: Removal of biofilm requires a shock treatment. ²

CDC: "methods demonstrated to be effective include self-contained water systems combined with chemical treatment..." ²

CDC: Flush water/air lines between patients for 20-30 seconds at a minimum. ²

ADS: "Flush at the beginning and end of each day for 2 minutes." ⁴

Verification of Compliance

Treating dental water is important, but alone does not protect your practice from dental board discipline or legal liability. Practices should keep documentation and records of SOPs, staff trainings, and waterline test results proving their protocol has been effective.

Compliance means:

- Regular Testing
- Standard Operating Procedures & Staff Trainings

Agency Reference:

ADA, CDC, FDA: Follow dental unit and treatment manufacturer recommendations to determine frequency of regular monitoring. ¹⁻³

ADS: If no manufacturer recommendation is made, test monthly until consecutive passing months, then quarterly. ⁴

ADS: Request laboratory test using R2A Agar or Filtration methods; if using in-office testing methods, test more frequently. ⁴

CDC: DHCP should be trained regarding water quality, biofilm formation, water treatment methods, and appropriate maintenance protocols. ²

Waterline Maintenance Recommendations from Manufacturers

The ADA, FDA, CDC, and ADS recommend consulting dental unit and treatment product manufacturers for ways to maintain dental water quality. In the absence of clarity, reach out to the ProEdge team– we're here to help.

Dental Unit Manufacturers

Waterline Recommendations	DCI	A-dec	Midmark	Belmont	Dentalez	Other*
Shocking	Weekly	Initially, Then After Failed Test	When Test Reveals >200 CFU/mL	After Failed Test	Initially, Then as Needed	Initially, Quarterly, and After Failed Test
Treatment	Follow ADA & CDC Guidelines	Daily Tablet	Straw or Daily Tablet	EPA Registered Product	EPA Registered Product	Daily
Test Frequency	Follow ADA & CDC Guidelines	Monthly, Then Quarterly	Monthly, Then Adjust	Monthly, Then Quarterly	Monthly, Then Quarterly	Monthly, Then Quarterly

*If you cannot find your dental unit manufacturer's guidelines, we recommend following the ADA and CDC recommendations.

Treatment Product Manufacturers

Waterline IFU's / Recommendations	ProEdge BluTube/BluTab	A-dec ICX	Solmetex Sterisil Straw/Citrisil	Hu-Freidy DentaPure
Shocking	Initially, Then Quarterly	Initially, Then After Failed Test	Monthly	Initially, Then After Failed Test
Treatment	Daily	Daily	Daily	Daily
Testing Frequency	Monthly, Then Quarterly	Monthly, Then Quarterly	Monthly	Monthly, Then Quarterly

ProEdge and ADS recommend quarterly testing at a minimum.

1. American Dental Association. Oral Health Topics. (2019). Retrieved from <https://www.ada.org/en/member-center/oral-health-topics/dental-unit-waterlines>. Accessed June 17, 2019.
2. Centers for Disease Control. Guidelines for Infection Control in Dental Health-Care Settings – 2003. Retrieved from <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/dental-unit-water-quality.html>
3. US Food & Drug Administration. Dental Unit Waterlines. (2018). Retrieved from <https://www.fda.gov/medical-devices/dental-devices/dental-unit-waterlines>
4. Mills, Shannon, et al. "Dental Unit Water Quality: Organization for Safety, Asepsis and Prevention White Paper and Recommendations– 2018" Journal of Dental Infection Control & Safety vol. 1 no. 1, Oct. 31, 2018.



Questions? We're Here For You.

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