## WATERLINE TESTING LOG

### Sampling Schedule

<table>
<thead>
<tr>
<th>Sampling Date</th>
<th>Team Member</th>
<th>Location (Room/Chair/Operatory)</th>
<th>Device</th>
<th>Date of Results</th>
<th>Pass Or Fail</th>
<th>Safety Level (Check One)</th>
<th>Corrective Action (If Necessary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/5/2019</td>
<td>Jane Doe</td>
<td>Operatory 1</td>
<td>AW Syringe</td>
<td>Source Water</td>
<td>1/7/2019</td>
<td>PASS</td>
<td>Continue Protocol</td>
</tr>
</tbody>
</table>

### Device Details

- **Device**: AW Syringe
- **Source Water**: None
- **Scaler**: None
- **Handpiece**: None
- **Combined**: None

### Corrective Action

- **Corrective Action**:
  - **Shock (1/4/2019) - Retest (1/5/2019)**
  - **Continue Protocol**

---

**Failed line? Consult with a safe water specialist today:** 888.843.3343 | support@proedgedental.com | ProEdgeDental.com