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WATER MICROBIOLOGY TEST REPORT



4564

Sample type: *Swimming Pool* *Routine Control* **Mains – Chlorinated** *Mains – Untreated* *Other (Specify)*

Sample collection details: *Collected by:* Colin Peters *Name & Address of Customer:* Connect St Helena, Seales Corner *Collection date:* 07/08/2017

Sample receipt details: *Date Received in Lab:* 07/08/2017 *Testing Date:* 07/08/2017

Lab No.	Source/Site	* Macroscopic Appearance	* Cl. Levels (ppm)		Microbiology Results				
			Free	Total	* WM 004 Total Colony Count cfu/1ml		WM 002		WM 003
					22°C/72h	37°C/48h	Coliforms cfu/100 ml	<i>E.coli</i> cfu/100 ml	<i>Enterococci</i> cfu/100ml
W794/1	3 Tanks HTH	Clear	3.07	3.37	0	0	Not Detected	Not Detected	Not Detected
W794/2	Standpipe Nr Playground HTH	Clear	2.88	3.38	0	0	Not Detected	Not Detected	Not Detected
W794/3	Contact Tank Redhill	Clear	4.20	4.46	0	0	Not Detected	Not Detected	Not Detected
W794/4	Standpipe Nr Clinic Levelwood	Clear	1.80	2.13	0	0	Not Detected	Not Detected	Not Detected
W794/5	Contact Tank Hutts Gate	Clear	3.44	3.68	0	0	Not Detected	Not Detected	Not Detected
W794/6	Standpipe Nr Clinic Longwood	Clear	2.88	3.14	0	0	Not Detected	Not Detected	Not Detected
W794/7	Contact Tank Chubb Spring	Slightly Cloudy	3.58	3.72	0	0	Not Detected	Not Detected	Not Detected
W794/8	Dillons Tank Jamestown	Slightly Cloudy	1.85	2.30	0	0	Not Detected	Not Detected	Not Detected

KEY: cfu – colony forming units*
 NE – Not examined

Reported by Food Microbiologist:	Gift T. Sibanda	Signature:		Date:	10.08.2017
Checked by Quality Manager:	Helena Stevens	Signature:		Date:	10/08/2017
Authorized by Lab Manager:	Geoff Benjamin	Signature:		Date:	10.08.2017

Notes:

1. Tests marked with * are NOT UKAS accredited
2. Opinions and interpretations expressed herein are outside the scope of UKAS Accreditation.
3. These results relate ONLY to the samples tested.
4. For method WM 002, Lactose broth was used for confirmation, instead of Lactose Peptone Water broth.
5. Chlorine levels and macroscopic appearance of water samples are provided by the customer on the request form and not by the Laboratory.
6. This report shall not be reproduced except in full, without written approval of the St Helena Public Health Laboratory.