



ST HELENA PUBLIC HEALTH LABORATORY
 General Hospital, Jamestown, St Helena
 Tel: +290 22500 Ext. 2035 Fax: +290 22530
 E-mail: microbiology@sainthelena.gov.sh

WATER MICROBIOLOGY TEST REPORT



4564

Sample type: *Swimming Pool* Routine Control

Mains – Chlorinated

Mains – Untreated

Other (Specify)

Sample collection details: *Collected by: Brian Young* Name & Address of Customer: *Connect St Helena, Seales Corner* Collection date: *30/09/2019*

Sample receipt details: *Date Received in Lab: 30/09/2019*

Testing Date: *30/09/2019*

Lab No.	Source/Site	* Macroscopic Appearance	* Cl. Levels (ppm)		* W/M 004 Total Colony Count cfu/1ml			Microbiology Results		
			Free	Total	22°C/72h	37°C/48h	Coliforms cfu/100 ml	W/M 002 E.coli cfu/100 ml	W/M 003 Enterococci cfu/100ml	
W/999/1	Standpipe Nr Longwood Clinic	Clear	1.89	2.12	0	0	Not Detected	Not Detected	Not Detected	
W/999/2	Contact Tank Red Hill	Clear	1.72	2.04	23	27	Not Detected	Not Detected	Not Detected	
W/999/3	Standpipe Nr Playground Half Tree Hollow	Clear	1.10	1.22	18	0	Not Detected	Not Detected	Not Detected	
W/999/4	Contact Tank Chubbs Spring	Clear	2.90	3.09	0	1	Not Detected	Not Detected	Not Detected	

KEY: cfu – colony forming units
 NE – Not examined

Reported by Food Microbiologist:	Kudzaishe Nayoto	Signature:		Date:	03/10/19
Checked by Ag Quality Manager:	Geoffrey Benjamin	Signature:		Date:	03/10/19
Authorized by Lab Manager:	Geoffrey Benjamin	Signature:		Date:	03/10/19

- 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. Chlorine levels and macroscopic appearance of water samples are provided by the customer on the request form and not by the Laboratory.
 5. This report shall not be reproduced except in full, without written approval of the St Helena Public Health Laboratory.