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U.S. ENVIRONMENTAL PROTECTION AGENCY Private Drinking Water Wells

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Frequent Questions

- How can I test the quality of my private drinking water supply?
- What concerns should I have after a flood if I have a private well?
- How can I protect my private water supply?

How can I test the quality of my private drinking water supply?

Consider testing your well for pesticides, organic chemicals, and heavy metals before you use it for the first time. Test private water supplies annually for nitrate and coliform bacteria to detect contamination problems early. Test them more frequently if you suspect a problem. Be aware of activities in your watershed that may affect the water quality of your well, especially if you live in an unsewered area.

Reasons to Test Your Water

The chart below will help you spot problems. The last five problems listed are not an immediate health concern, but they can make your water taste bad, may indicate problems, and could affect your well long term.

Conditions or Nearby Activities:	Test for:
Recurring gastro- intestinal illness	Coliform bacteria
Household plumbing contains lead	pH, lead, copper

Radon in indoor air or region is radon rich	Radon
Corrosion of pipes, plumbing	Corrosion, pH, lead
Nearby areas of intensive agriculture	Nitrate, pesticides, coliform bacteria
Coal or other mining operations nearby	Metals, pH, corrosion
Gas drilling operations nearby	Chloride, sodium, barium, strontium
Dump, junkyard, landfill, factory, gas station, or dry- cleaning operation nearby	Volatile organic compounds, total dissolved solids, pH, sulfate, chloride, metals
Odor of gasoline or fuel oil, and near gas station or buried fuel tanks	Volatile organic compounds
Objectionable taste or smell	Hydrogen sulfide, corrosion, metals
Stained plumbing fixtures, laundry	Iron, copper, manganese
Salty taste and seawater, or a heavily salted roadway nearby	Chloride, total dissolved solids, sodium

http://www.epa.gov/safewater/privatewells/faq.html (2 of 6)9/14/2009 1:33:14 PM

Scaly residues, soaps don't lather	Hardness
Rapid wear of water treatment equipment	pH, corrosion
Water softener needed to treat hardness	Manganese, iron
Water appears cloudy, frothy, or colored	Color, detergents

For more information on for more information on what human activities can pollute ground water see:

 Drinking Water From Household Wells PDF (24 pp, 1 M) (ALL ABOUT PDF FILES)

EPA 816-K-02-003 January 2002

If you use a private laboratory to conduct the testing, nitrate and bacteria samples will typically cost between \$10 and \$20 to complete. Testing for other contaminants will be more expensive. For example, testing for pesticides or organic chemicals may cost from several hundred to several thousand dollars. Only use laboratories that are certified to do drinking water tests. To find a certified laboratory in your state, you can contact:

- A <u>State Certification Officer</u> to get a list of certified water testing labs in your state (epa.gov/safewater/privatewells/labs. html), or
- Your local health department may also test private well water for free. Phone numbers for your local, county, or state health department are available under the "health" or "government" listings in your phone book.

Most laboratories mail back the sample results within a week or two. If a contaminant is detected, the results will include the concentration found and an indication of whether this level exceeds a drinking water health standard.

o See the List of Drinking Water Contaminants and their

Maximum Contaminant Levels (MCL) page for information on Drinking Water Contaminants.

If a standard is exceeded in your sample, retest the water supply immediately and contact your public health department for assistance. Some problems can be handled quickly. For example, high bacteria concentrations can sometimes be controlled by disinfecting a well. Filters or other on-site treatment processes may also remove some contaminants. Other problems may require a new source of water, or a new, deeper well. If serious problems persist, you may need to rely on bottled water until a new water source can be obtained.

You should test private water supplies annually for nitrates, coliform bacteria, total dissolved solids, and pH levels to detect contamination problems early. Test more frequently if a problem was found in earlier tests.

For more information, read <u>Home Water Testing</u> (564 K PDF FILE, 2pgs) (ALL ABOUT PDF FILES)

What concerns should I have after a flood if I have a private well?

Stay away from the well pump while flooded to avoid electric shock, AND . . .

- Do not drink or wash from the flooded well to avoid becoming sick.
- Get assistance from a well or pump contractor to clean and turn on the pump.
- After the pump is turned back on, pump the well until the water runs clear to rid the well of flood water.
- If the water does not run clear, get advice from the county or state health department or extension service.

For additional information:

- o What to Do After the Flood
- o Septic Systems What to Do after the Flood
- <u>After a Hurricane or Flood: Cleanup of Flood Water</u> From the Center for Disease Control EXIT Disclaimer

How can I protect my private water supply?

Protect your water supply by carefully managing activities near the water source. For households using a domestic well, this includes keeping contaminants away from sinkholes and the well itself. Keep hazardous chemicals out of septic systems.

- Periodically inspect exposed parts of the well for problems such as:
 - cracked, corroded, or damaged well casing
 - broken or missing well cap
 - settling and cracking of surface seals.
- Slope the area around the well to drain surface runoff away from the well.
- Install a well cap or sanitary seal to prevent unauthorized use of, or entry into, the well.
- Have the well tested once a year for coliform bacteria, nitrates, and other constituents of concern.
- Keep accurate records of any well maintenance, such as disinfection or sediment removal, that may require the use of chemicals in the well.
- Hire a certified well driller for any new well construction, modification, or abandonment and closure.
- Avoid mixing or using pesticides, fertilizers, herbicides, degreasers, fuels, and other pollutants near the well.
- o Do not dispose of wastes in dry wells or in abandoned wells.
- Do not cut off the well casing below the land surface.
- Pump and inspect septic systems as often as recommended by your local health department.
- Never dispose of harsh chemicals, solvents, petroleum products, or pesticides in a septic system or dry well.

For more information on protecting your well visit these web sites:

- National Ground Water Association EXIT Disclaimer
- American Ground Water Trust EXIT Disclaimer

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Drinking Water Contaminants

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National Primary Drinking Water Regulations

National Primary Drinking Water Regulations (NPDWRs or primary standards) are legally enforceable standards that apply to public water systems. Primary standards protect public health by limiting the



levels of contaminants in drinking water. Visit the list of regulated contaminants with links for more details.

- List of Contaminants & their Maximum Contaminant Level (MCLs)
- <u>Setting Standards for Safe Drinking Water</u> to learn about EPA's standard-setting process
- EPA's Regulated Contaminant Timeline (PDF) (1 pp, 86 K) (About PDF)
- <u>National Primary Drinking Water Regulations</u>- The complete regulations regarding these contaminants available from the Code of Federal Regulations Website

Information on this section

- <u>Alphabetical List (PDF)</u>
 (6 pp, 924 K) (<u>About PDF</u>)
 EPA 816-F-09-0004, May 2009
- The links provided below are to either Consumer Fact Sheet, Rule Implementation web sites, or PDF files.
 (About PDE)

(<u>About PDF</u>)

List of Contaminants & their MCLs

- Microorganisms
- **Disinfectants**
- Disinfection Byproducts
- Inorganic Chemicals
- Organic Chemicals
- <u>Radionuclides</u>

Microorganisms

Contaminant	MCLG ¹ (mg/L) ²	MCL or TT1 (mg/ L)2	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
Cryptosporidium (pdf file)	zero	TT <u>3</u>	Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste

Giardia lamblia	zero	TT <u>3</u>	Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste
Heterotrophic plate count	n/a	TT <u>3</u>	HPC has no health effects; it is an analytic method used to measure the variety of bacteria that are common in water. The lower the concentration of bacteria in drinking water, the better maintained the water system is.	HPC measures a range of bacteria that are naturally present in the environment
Legionella	zero	TT <u></u> ³	Legionnaire's Disease, a type of pneumonia	Found naturally in water; multiplies in heating systems
Total Coliforms (including fecal coliform and <i>E</i> . <i>Coli</i>)	zero	5.0% <u>4</u>	Not a health threat in itself; it is used to indicate whether other potentially harmful bacteria may be present ⁵	Coliforms are naturally present in the environment; as well as feces; fecal coliforms and <i>E. coli</i> only come from human and animal fecal waste.
Turbidity	n/a	TT <u>3</u>	Turbidity is a measure of the cloudiness of water. It is used to indicate water quality and filtration effectiveness (e.g., whether disease-causing organisms are present). Higher turbidity levels are often associated with higher levels of disease-causing microorganisms such as viruses, parasites and some bacteria. These organisms can cause symptoms such as nausea, cramps, diarrhea, and associated headaches.	Soil runoff
Viruses (enteric)	zero	ΤΤ <u>3</u>	Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste

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Disinfection Byproducts

Contaminant	MCLG ¹ (mg/L) ²	MCL or TT1 (mg/ L)2	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
Bromate	zero	0.010	Increased risk of cancer	Byproduct of drinking water disinfection
<u>Chlorite</u>	0.8	1.0	Anemia; infants & young children: nervous system effects	Byproduct of drinking water disinfection
<u>Haloacetic</u> acids (HAA5)	n/a ⁶	0.0607	Increased risk of cancer	Byproduct of drinking water disinfection
<u>Total</u> <u>Trihalomethanes</u> (TTHMs)	n/a ⁶	0.0807	Liver, kidney or central nervous system problems; increased risk of cancer	Byproduct of drinking water disinfection

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Disinfectants

Contaminant	MRDLG ¹ (mg/L) ²	MRDL ¹ (mg/L) ²	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
<u>Chloramines</u> (as Cl ₂)	MRDLG=41	MRDL=4.0 <u>1</u>	Eye/nose irritation; stomach discomfort, anemia	Water additive used to control microbes
<u>Chlorine (as</u> <u>Cl₂)</u>	MRDLG=41	MRDL=4.0 <u>1</u>	Eye/nose irritation; stomach discomfort	Water additive used to control microbes

<u>Chlorine</u>	MRDLG=0.81	MRDL=0.8 ¹	Anemia; infants & young	Water additive used to
dioxide (as			children: nervous system	control microbes
<u>ClO_2</u>)			effects	

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Inorganic Chemicals

Contaminant	MCLG ¹ (mg/L) ²	MCL or TT <u>1</u> (mg/L)2	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
Antimony	0.006	0.006	Increase in blood cholesterol; decrease in blood sugar	Discharge from petroleum refineries; fire retardants; ceramics; electronics; solder
<u>Arsenic</u>	07	0.010 as of 01/23/06	Skin damage or problems with circulatory systems, and may have increased risk of getting cancer	Erosion of natural deposits; runoff from orchards, runoff from glass & electronicsproduction wastes
<u>Asbestos</u> (fiber >10 micrometers)	7 million fibers per liter	7 MFL	Increased risk of developing benign intestinal polyps	Decay of asbestos cement in water mains; erosion of natural deposits
<u>Barium</u>	2	2	Increase in blood pressure	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
<u>Beryllium</u>	0.004	0.004	Intestinal lesions	Discharge from metal refineries and coal- burning factories; discharge from electrical, aerospace, and defense industries

<u>Cadmium</u>	0.005	0.005	Kidney damage	Corrosion of galvanized pipes; erosion of natural deposits; discharge from metal refineries; runoff from waste batteries and paints
<u>Chromium</u> (total)	0.1	0.1	Allergic dermatitis	Discharge from steel and pulp mills; erosion of natural deposits
<u>Copper</u>	1.3	TT ⁸ ; Action Level=1.3	Short term exposure: Gastrointestinal distress Long term exposure: Liver or kidney damage People with Wilson's Disease should consult	Corrosion of household plumbing systems; erosion of natural deposits
			their personal doctor if the amount of copper in their water exceeds the action level	
Cyanide (as free cyanide)	0.2	0.2	Nerve damage or thyroid problems	Discharge from steel/ metal factories; discharge from plastic and fertilizer factories
Fluoride	4.0	4.0	Bone disease (pain and tenderness of the bones); Children may get mottled teeth	Water additive which promotes strong teeth; erosion of natural deposits; discharge from fertilizer and aluminum factories

<u>Lead</u>	zero	TT ⁸ ; Action Level=0.015	Infants and children: Delays in physical or mental development; children could show slight deficits in attention span and learning abilities Adults: Kidney problems; high blood pressure	Corrosion of household plumbing systems; erosion of natural deposits
<u>Mercury</u> (inorganic)	0.002	0.002	Kidney damage	Erosion of natural deposits; discharge from refineries and factories; runoff from landfills and croplands
<u>Nitrate</u> (measured as <u>Nitrogen)</u>	10	10	Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome.	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
<u>Nitrite</u> (measured as <u>Nitrogen)</u>	1	1	Infants below the age of six months who drink water containing nitrite in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome.	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
<u>Selenium</u>	0.05	0.05	Hair or fingernail loss; numbness in fingers or toes; circulatory problems	Discharge from petroleum refineries; erosion of natural deposits; discharge from mines

<u>Thallium</u>	0.0005	0.002	Hair loss; changes in blood; kidney, intestine, or liver problems	Leaching from ore- processing sites; discharge from electronics, glass, and drug factories
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Organic Chemicals

Contaminant	MCLG ¹ (mg/L) ²	MCL or TT ¹ (mg/L) ²	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
<u>Acrylamide</u>	zero	TT ⁹	Nervous system or blood problems; increased risk of cancer	Added to water during sewage/ wastewater treatment
<u>Alachlor</u>	zero	0.002	Eye, liver, kidney or spleen problems; anemia; increased risk of cancer	Runoff from herbicide used on row crops
<u>Atrazine</u>	0.003	0.003	Cardiovascular system or reproductive problems	Runoff from herbicide used on row crops
Benzene	zero	0.005	Anemia; decrease in blood platelets; increased risk of cancer	Discharge from factories; leaching from gas storage tanks and landfills
Benzo(a)pyrene (PAHs)	zero	0.0002	Reproductive difficulties; increased risk of cancer	Leaching from linings of water storage tanks and distribution lines
<u>Carbofuran</u>	0.04	0.04	Problems with blood, nervous system, or reproductive system	Leaching of soil fumigant used on rice and alfalfa

<u>Carbon</u> <u>tetrachloride</u>	zero	0.005	Liver problems; increased risk of cancer	Discharge from chemical plants and other industrial activities
<u>Chlordane</u>	zero	0.002	Liver or nervous system problems; increased risk of cancer	Residue of banned termiticide
<u>Chlorobenzene</u>	0.1	0.1	Liver or kidney problems	Discharge from chemical and agricultural chemical factories
<u>2,4-D</u>	0.07	0.07	Kidney, liver, or adrenal gland problems	Runoff from herbicide used on row crops
<u>Dalapon</u>	0.2	0.2	Minor kidney changes	Runoff from herbicide used on rights of way
<u>1,2-Dibromo-3-</u> chloropropane (DBCP)	zero	0.0002	Reproductive difficulties; increased risk of cancer	Runoff/leaching from soil fumigant used on soybeans, cotton, pineapples, and orchards
o-Dichlorobenzene	0.6	0.6	Liver, kidney, or circulatory system problems	Discharge from industrial chemical factories
<u>p-Dichlorobenzene</u>	0.075	0.075	Anemia; liver, kidney or spleen damage; changes in blood	Discharge from industrial chemical factories
<u>1,2-Dichloroethane</u>	zero	0.005	Increased risk of cancer	Discharge from industrial chemical factories

<u>1,1-Dichloroethylene</u>	0.007	0.007	Liver problems	Discharge from industrial chemical factories
cis-1,2-Dichloroethylene	0.07	0.07	Liver problems	Discharge from industrial chemical factories
trans-1,2-Dichloroethylene	0.1	0.1	Liver problems	Discharge from industrial chemical factories
Dichloromethane	zero	0.005	Liver problems; increased risk of cancer	Discharge from drug and chemical factories
<u>1,2-Dichloropropane</u>	zero	0.005	Increased risk of cancer	Discharge from industrial chemical factories
Di(2-ethylhexyl) adipate	0.4	0.4	Weight loss, liver problems, or possible reproductive difficulties.	Discharge from chemical factories
Di(2-ethylhexyl) phthalate	zero	0.006	Reproductive difficulties; liver problems; increased risk of cancer	Discharge from rubber and chemical factories
<u>Dinoseb</u>	0.007	0.007	Reproductive difficulties	Runoff from herbicide used on soybeans and vegetables
<u>Dioxin (2,3,7,8-TCDD)</u>	zero	0.00000003	Reproductive difficulties; increased risk of cancer	Emissions from waste incineration and other combustion; discharge from chemical factories

<u>Diquat</u>	0.02	0.02	Cataracts	Runoff from herbicide use
Endothall	0.1	0.1	Stomach and intestinal problems	Runoff from herbicide use
<u>Endrin</u>	0.002	0.002	Liver problems	Residue of banned insecticide
<u>Epichlorohydrin</u>	zero	TT ⁹	Increased cancer risk, and over a long period of time, stomach problems	Discharge from industrial chemical factories; an impurity of some water treatment chemicals
Ethylbenzene	0.7	0.7	Liver or kidneys problems	Discharge from petroleum refineries
Ethylene dibromide	zero	0.00005	Problems with liver, stomach, reproductive system, or kidneys; increased risk of cancer	Discharge from petroleum refineries
<u>Glyphosate</u>	0.7	0.7	Kidney problems; reproductive difficulties	Runoff from herbicide use
<u>Heptachlor</u>	zero	0.0004	Liver damage; increased risk of cancer	Residue of banned termiticide
Heptachlor epoxide	zero	0.0002	Liver damage; increased risk of cancer	Breakdown of heptachlor

<u>Hexachlorobenzene</u>	zero	0.001	Liver or kidney problems; reproductive difficulties; increased risk of cancer	Discharge from metal refineries and agricultural chemical factories
<u>Hexachlorocyclopentadiene</u>	0.05	0.05	Kidney or stomach problems	Discharge from chemical factories
<u>Lindane</u>	0.0002	0.0002	Liver or kidney problems	Runoff/leaching from insecticide used on cattle, lumber, gardens
<u>Methoxychlor</u>	0.04	0.04	Reproductive difficulties	Runoff/leaching from insecticide used on fruits, vegetables, alfalfa, livestock
<u>Oxamyl (Vydate)</u>	0.2	0.2	Slight nervous system effects	Runoff/leaching from insecticide used on apples, potatoes, and tomatoes
Polychlorinated biphenyls (PCBs)	zero	0.0005	Skin changes; thymus gland problems; immune deficiencies; reproductive or nervous system difficulties; increased risk of cancer	Runoff from landfills; discharge of waste chemicals
Pentachlorophenol	zero	0.001	Liver or kidney problems; increased cancer risk	Discharge from wood preserving factories
Picloram	0.5	0.5	Liver problems	Herbicide runoff
Simazine	0.004	0.004	Problems with blood	Herbicide runoff

<u>Styrene</u>	0.1	0.1	Liver, kidney, or circulatory system problems	Discharge from rubber and plastic factories; leaching from landfills
<u>Tetrachloroethylene</u>	zero	0.005	Liver problems; increased risk of cancer	Discharge from factories and dry cleaners
<u>Toluene</u>	1	1	Nervous system, kidney, or liver problems	Discharge from petroleum factories
<u>Toxaphene</u>	zero	0.003	Kidney, liver, or thyroid problems; increased risk of cancer	Runoff/leaching from insecticide used on cotton and cattle
<u>2,4,5-TP (Silvex)</u>	0.05	0.05	Liver problems	Residue of banned herbicide
<u>1,2,4-Trichlorobenzene</u>	0.07	0.07	Changes in adrenal glands	Discharge from textile finishing factories
<u>1,1,1-Trichloroethane</u>	0.20	0.2	Liver, nervous system, or circulatory problems	Discharge from metal degreasing sites and other factories
<u>1,1,2-Trichloroethane</u>	0.003	0.005	Liver, kidney, or immune system problems	Discharge from industrial chemical factories
<u>Trichloroethylene</u>	zero	0.005	Liver problems; increased risk of cancer	Discharge from metal degreasing sites and other factories

<u>Vinyl chloride</u>	zero	0.002	Increased risk of cancer	Leaching from PVC pipes; discharge from plastic factories
<u>Xylenes (total)</u>	10	10	Nervous system damage	Discharge from petroleum factories; discharge from chemical factories

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Radionuclides

Contaminant	MCLG ¹ (mg/L) ²	MCL or TT ¹ (mg/L) ²	Potential Health Effects from Ingestion of Water	Sources of Contaminant in Drinking Water
Alpha particles	none <u>7</u> zero	15 picocuries per Liter (pCi/L)	Increased risk of cancer	Erosion of natural deposits of certain minerals that are radioactive and may emit a form of radiation known as alpha radiation
Beta particles and photon emitters	none ⁷ zero	4 millirems per year	Increased risk of cancer	Decay of natural and man- made deposits of
		1 2		certain minerals that are radioactive and may emit forms of radiation known as photons and beta radiation
Radium 226 and Radium 228 (combined)	none ⁷ zero	5 pCi/L	Increased risk of cancer	Erosion of natural deposits
Uranium	zero	30 ug/L as of 12/08/03	Increased risk of cancer, kidney toxicity	Erosion of natural deposits

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Notes

¹ Definitions:

Maximum Contaminant Level (MCL) - The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to MCLGs as feasible using the best available treatment technology and taking cost into consideration. MCLs are enforceable standards.

Maximum Contaminant Level Goal (MCLG) - The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety and are non-enforceable public health goals.

Maximum Residual Disinfectant Level (MRDL) - The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal (MRDLG) - The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Treatment Technique - A required process intended to reduce the level of a contaminant in drinking water.

 2 Units are in milligrams per liter (mg/L) unless otherwise noted. Milligrams per liter are equivalent to parts per million.

³ EPA's surface water treatment rules require systems using surface water or ground water under the direct influence of surface water to (1) disinfect their water, and (2) filter their water or meet criteria for avoiding filtration so that the following contaminants are controlled at the following levels:

- Cryptosporidium: (as of1/1/02 for systems serving >10,000 and 1/14/05 for systems serving <10,000) 99% removal.
- Giardia lamblia: 99.9% removal/inactivation
- Viruses: 99.99% removal/inactivation
- Legionella: No limit, but EPA believes that if *Giardia* and viruses are removed/inactivated, *Legionella* will also be controlled.
- Turbidity: At no time can turbidity (cloudiness of water) go above 5 nephelolometric turbidity units (NTU); systems that filter must ensure that the turbidity go no higher than 1 NTU (0.5 NTU for conventional or direct filtration) in at least 95% of the daily samples in any month. As of January 1, 2002, turbidity may never exceed 1 NTU, and must not exceed 0.3 NTU in 95% of daily samples in any month.
- HPC: No more than 500 bacterial colonies per milliliter.
- Long Term 1 Enhanced Surface Water Treatment (Effective Date: January 14, 2005); Surface water systems or (GWUDI) systems serving fewer than 10,000 people must comply with the

applicable Long Term 1 Enhanced Surface Water Treatment Rule provisions (e.g. turbidity standards, individual filter monitoring, Cryptosporidium removal requirements, updated watershed control requirements for unfiltered systems).

- Long Term 2 Enhanced Surface Water Treatment Rule (Effective Date: January 4, 2006) -Surface water systems or GWUDI systems must comply with the additional treatment for Cryptosporidium specified in this rule based on their Cryptosporidium bin classification calculated after the completion of source water monitoring.
- Filter Backwash Recycling; The Filter Backwash Recycling Rule requires systems that recycle to return specific recycle flows through all processes of the system's existing conventional or direct filtration system or at an alternate location approved by the state.

⁴ more than 5.0% samples total coliform-positive in a month. (For water systems that collect fewer than 40 routine samples per month, no more than one sample can be total coliform-positive per month.) Every sample that has total coliform must be analyzed for either fecal coliforms or E. coli if two consecutive TC-positive samples, and one is also positive for E.coli fecal coliforms, system has an acute MCL violation.

⁵ Fecal coliform and E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Disease-causing microbes (pathogens) in these wastes can cause diarrhea, cramps, nausea, headaches, or other symptoms. These pathogens may pose a special health risk for infants, young children, and people with severely compromised immune systems.

⁶ Although there is no collective MCLG for this contaminant group, there are individual MCLGs for some of the individual contaminants:

- Trihalomethanes: bromodichloromethane (zero); bromoform (zero); dibromochloromethane (0.06 mg/L): chloroform (0.07mg/L).
- Haloacetic acids: dichloroacetic acid (zero); trichloroacetic acid (0.02 mg/L); monochloroacetic acid (0.07 mg/L). Bromoacetic acid and dibromoacetic acid are regulated with this group but have no MCLGs.

⁷ The MCL values are the same in the Stage 2 DBPR as they were in the Stage 1 DBPR, but compliance with the MCL is based on different calculations. Under Stage 1, compliance is based on a running annual average (RAA). Under Stage 2, compliance is based on a locational running annual average (LRAA), where the annual average at each sampling location in the distribution system is used to determine compliance with the MCLs. The LRAA requirement will become effective April 1, 2012 for systems on schedule 1, October 1, 2012 for systems on schedule 2, and October 1, 2013 for all remaining systems.

⁸ Lead and copper are regulated by a Treatment Technique that requires systems to control the corrosiveness of their water. If more than 10% of tap water samples exceed the action level, water systems must take additional steps. For copper, the action level is 1.3 mg/L, and for lead is 0.015 mg/L.

⁹ Each water system must certify, in writing, to the state (using third-party or manufacturer's certification) that when acrylamide and epichlorohydrin are used in drinking water systems, the combination (or product) of dose and monomer level does not exceed the levels specified, as follows:

- Acrylamide = 0.05% dosed at 1 mg/L (or equivalent)
- Epichlorohydrin = 0.01% dosed at 20 mg/L (or equivalent)

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National Secondary Drinking Water Regulations

National Secondary Drinking Water Regulations (NSDWRs or secondary standards) are nonenforceable guidelines regulating contaminants that may cause cosmetic effects (such as skin or tooth discoloration) or aesthetic effects (such as taste, odor, or color) in drinking water. EPA recommends secondary standards to water systems but does not require systems to comply. However, states may choose to adopt them as enforceable standards.

- <u>National Secondary Drinking Water Regulations</u> The complete regulations regarding these contaminants available from the Code of Federal Regulations Web Site.
- For more information, read <u>Secondary Drinking Water Regulations: Guidance for Nuisance</u> <u>Chemicals</u>.

List of National Secondary Drinking Water Regulations

Contaminant	Secondary Standard
Aluminum	0.05 to 0.2 mg/L
Chloride	250 mg/L
Color	15 (color units)
Copper	1.0 mg/L
Corrosivity	noncorrosive

Fluoride	2.0 mg/L
Foaming Agents	0.5 mg/L
Iron	0.3 mg/L
Manganese	0.05 mg/L
Odor	3 threshold odor number
рН	6.5-8.5
Silver	0.10 mg/L
Sulfate	250 mg/L
Total Dissolved Solids	500 mg/L
Zinc	5 mg/L

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Unregulated Contaminants

This list of contaminants which, at the time of publication, are not subject to any proposed or promulgated national primary drinking water regulation (NPDWR), are known or anticipated to occur in public water systems, and may require regulations under SDWA. For more information check out the list, or vist the Drinking Water Contaminant Candidate List (CCL) web site.

- Drinking Water Contaminant Candidate List 2
- Drinking Water Contaminant Candidate List (CCL) Web Site
- <u>Unregulated Contaminant Monitoring Program (UCM)</u>
- Information on specific unregulated contaminants
 - MTBE (methyl-t-butyl ether) in drinking water

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National Primary Drinking Water Regulations

Contaminant	MCL or TT ¹ (mg/L) ²	Potential health effects from long-term ³ exposure above the MCL	Common sources of contaminant in drinking water	Public Health Goal (mg/L) ²
OC Acrylamide	TT ⁴	Nervous system or blood problems; increased risk of cancer	Added to water during sewage/ wastewater treatment	zero
OC Alachlor	0.002	Eye, liver, kidney or spleen problems; anemia; increased risk of cancer	Runoff from herbicide used on row crops	zero
R Alpha/photon emitters	15 picocuries per Liter (pCi/L)	Increased risk of cancer	Erosion of natural deposits of certain minerals that are radioactive and may emit a form of radiation known as alpha radiation	zero
IOC Antimony	0.006	Increase in blood cholesterol; decrease in blood sugar	Discharge from petroleum refineries; fire retardants; ceramics; electronics; solder	0.006
IOC Arsenic	0.010	Skin damage or problems with circulatory systems, and may have increased risk of getting cancer	Erosion of natural deposits; runoff from orchards; runoff from glass & electronics production wastes	0
Asbestos (fibers >10 micrometers)	7 million fibers per Liter (MFL)	Increased risk of developing benign intestinal polyps	Decay of asbestos cement in water mains; erosion of natural deposits	7 MFL
OC Atrazine	0.003	Cardiovascular system or reproductive problems	Runoff from herbicide used on row crops	0.003
IOC Barium	2	Increase in blood pressure	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits	2
OC Benzene	0.005	Anemia; decrease in blood platelets; increased risk of cancer	Discharge from factories; leaching from gas storage tanks and landfills	zero
OC Benzo(a)pyrene (PAHs)	0.0002	Reproductive difficulties; increased risk of cancer	Leaching from linings of water storage tanks and distribution lines	zero
IOC Beryllium	0.004	Intestinal lesions	Discharge from metal refineries and coal-burning factories; discharge from electrical, aerospace, and defense industries	0.004
R Beta photon emitters	4 millirems per year	Increased risk of cancer	Decay of natural and man-made deposits of certain minerals that are radioactive and may emit forms of radiation known as photons and beta radiation	zero
DBP Bromate	0.010	Increased risk of cancer	Byproduct of drinking water disinfection	zero
IOC Cadmium	0.005	Kidney damage	Corrosion of galvanized pipes; erosion of natural deposits; discharge from metal refineries; runoff from waste batteries and paints	0.005
OC Carbofuran	0.04	Problems with blood, nervous system, or reproductive system	Leaching of soil fumigant used on rice and alfalfa	0.04
OC Carbon tetrachloride	0.005	Liver problems; increased risk of cancer	Discharge from chemical plants and other industrial activities	zero
D Chloramines (as Cl_2)	MRDL=4.0 ¹	Eye/nose irritation; stomach discomfort; anemia	Water additive used to control microbes	MRDLG=41
OC Chlordane	0.002	Liver or nervous system problems; increased risk of cancer	Residue of banned termiticide	zero
D Chlorine (as Cl_2)	MRDL=4.0 ¹	Eye/nose irritation; stomach discomfort	Water additive used to control microbes	MRDLG=41
D Chlorine dioxide $(as ClO_2)$	MRDL=0.81	Anemia; infants, young children, and fetuses of pregnant women: nervous system effects	Water additive used to control microbes	MRDLG=0.81
DBP Chlorite	1.0	Anemia; infants, young children, and fetuses of pregnant women: nervous system effects	Byproduct of drinking water disinfection	0.8
OC Chlorobenzene	0.1	Liver or kidney problems	Discharge from chemical and agricultural chemical factories	0.1
IOC Chromium (total)	0.1	Allergic dermatitis	Discharge from steel and pulp mills; erosion of natural deposits	0.1
IOC Copper	TT ⁵ ; Action Level = 1.3	Short-term exposure: Gastrointestinal distress. Long-term exposure: Liver or kidney damage. People with Wilson's Disease should consult their personal doctor if the amount of copper in their water exceeds the action level	Corrosion of household plumbing systems; erosion of natural deposits	1.3
M Cryptosporidium	TT ⁷	Short-term exposure: Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste	zero

D Disinfectant DBP Disinfection Byproduct

LEGEND





R Radionuclides

ontaminant	MCL or TT ¹ (mg/L) ²	Potential health effects from long-term ³ exposure above the MCL	Common sources of contaminant in drinking water	Public Healtl Goal (mg/L) ²
IOC Cyanide (as free cyanide)	0.2	Nerve damage or thyroid problems	Discharge from steel/metal factories; discharge from plastic and fertilizer factories	0.2
0C 2,4-D	0.07	Kidney, liver, or adrenal gland problems	Runoff from herbicide used on row crops	0.07
OC Dalapon	0.2	Minor kidney changes	Runoff from herbicide used on rights of way	0.2
OC 1,2-Dibromo-3- chloropropane (DBCP)	0.0002	Reproductive difficulties; increased risk of cancer	Runoff/leaching from soil fumigant used on soybeans, cotton, pineapples, and orchards	zero
OC o-Dichlorobenzene	0.6	Liver, kidney, or circulatory system problems	Discharge from industrial chemical factories	0.6
OC p-Dichlorobenzene	0.075	Anemia; liver, kidney or spleen damage; changes in blood	Discharge from industrial chemical factories	0.075
0C 1,2-Dichloroethane	0.005	Increased risk of cancer	Discharge from industrial chemical factories	zero
0C 1,1-Dichloroethylene	0.007	Liver problems	Discharge from industrial chemical factories	0.007
OC cis-1,2-Dichloroethylene	0.07	Liver problems	Discharge from industrial chemical factories	0.07
OC trans-1,2- Dichloroethylene	0.1	Liver problems	Discharge from industrial chemical factories	0.1
OC Dichloromethane	0.005	Liver problems; increased risk of cancer	Discharge from drug and chemical factories	zero
0C 1,2-Dichloropropane	0.005	Increased risk of cancer	Discharge from industrial chemical factories	zero
Di(2-ethylhexyl) adipate	0.4	Weight loss, liver problems, or possible reproductive difficulties	Discharge from chemical factories	0.4
Di(2-ethylhexyl) phthalate	0.006	Reproductive difficulties; liver problems; increased risk of cancer	Discharge from rubber and chemical factories	zero
Dinoseb	0.007	Reproductive difficulties	Runoff from herbicide used on soybeans and vegetables	0.007
Dioxin (2,3,7,8-TCDD)	0.0000003	Reproductive difficulties; increased risk of cancer	Emissions from waste incineration and other combustion; discharge from chemical factories	zero
OC Diquat	0.02	Cataracts	Runoff from herbicide use	0.02
C Endothall	0.1	Stomach and intestinal problems	Runoff from herbicide use	0.1
OC Endrin	0.002	Liver problems	Residue of banned insecticide	0.002
DC Epichlorohydrin	TT^4	Increased cancer risk; stomach problems	Discharge from industrial chemical factories; an impurity of some water treatment chemicals	zero
C Ethylbenzene	0.7	Liver or kidney problems	Discharge from petroleum refineries	0.7
Ethylene dibromide	0.00005	Problems with liver, stomach, reproductive system, or kidneys; increased risk of cancer	Discharge from petroleum refineries	zero
M Fecal coliform and <i>E. coli</i>	MCL ⁶	Fecal coliforms and <i>E. coli</i> are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes may cause short term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, young children, and people with severely compromised immune systems.	Human and animal fecal waste	zero ⁶
OC Fluoride	4.0	Bone disease (pain and tenderness of the bones); children may get mottled teeth	Water additive which promotes strong teeth; erosion of natural deposits; discharge from fertilizer and aluminum factories	4.0
M Giardia lamblia	TT^7	Short-term exposure: Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste	zero
OC Glyphosate	0.7	Kidney problems; reproductive difficulties	Runoff from herbicide use	0.7
Haloacetic acids (HAA5)	0.060	Increased risk of cancer	Byproduct of drinking water disinfection	n/a ⁹
OC Heptachlor	0.0004	Liver damage; increased risk of cancer	Residue of banned termiticide	zero
OC Heptachlor epoxide	0.0002	Liver damage; increased risk of cancer	Breakdown of heptachlor	zero
M Heterotrophic plate count (HPC)	TT ⁷	HPC has no health effects; it is an analytic method used to measure the variety of bacteria that are common in water. The lower the concentration of bacteria in drinking water, the better maintained the water system is.	HPC measures a range of bacteria that are naturally present in the environment	n/a

LEGEND

D Disinfectant DBP Disinfection Byproduct



Organic Chemical

R Radionuclides

ontaminant	MCL or TT ¹ (mg/L) ²	Potential health effects from long-term ³ exposure above the MCL	Common sources of contaminant in drinking water	Public Health Goal (mg/L) ²
OC Hexachlorobenzene	0.001	Liver or kidney problems; reproductive difficulties; increased risk of cancer	Discharge from metal refineries and agricultural chemical factories	zero
OC Hexachlorocyclopentadiene	0.05	Kidney or stomach problems	Discharge from chemical factories	0.05
IOC Lead	TT5; Action Level=0.015	Infants and children: Delays in physical or or mental development; children could show slight deficits in attention span and learning abilities; Adults: Kidney problems; high blood pressure	Corrosion of household plumbing systems; erosion of natural deposits	zero
M Legionella	TT7	Legionnaire's Disease, a type of pneumonia	Found naturally in water; multiplies in heating systems	zero
OC Lindane	0.0002	Liver or kidney problems	Runoff/leaching from insecticide used on cattle, lumber, gardens	0.0002
IOC Mercury (inorganic)	0.002	Kidney damage	Erosion of natural deposits; discharge from refineries and factories; runoff from landfills and croplands	0.002
OC Methoxychlor	0.04	Reproductive difficulties	Runoff/leaching from insecticide used on fruits, vegetables, alfalfa, livestock	0.04
IOC Nitrate (measured as Nitrogen)	10	Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome.	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits	10
IOC Nitrite (measured as Nitrogen)	1	Infants below the age of six months who drink water containing nitrite in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue-baby syndrome.	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits	1
OC Oxamyl (Vydate)	0.2	Slight nervous system effects	Runoff/leaching from insecticide used on apples, potatoes, and tomatoes	0.2
OC Pentachlorophenol	0.001	Liver or kidney problems; increased cancer risk	Discharge from wood-preserving factories	zero
OC Picloram	0.5	Liver problems	Herbicide runoff	0.5
OC Polychlorinated biphenyls (PCBs)	0.0005	Skin changes; thymus gland problems; immune deficiencies; reproductive or nervous system difficulties; increased risk of cancer	Runoff from landfills; discharge of waste chemicals	zero
R Radium 226 and Radium 228 (combined)	5 pCi/L	Increased risk of cancer	Erosion of natural deposits	zero
IOC Selenium	0.05	Hair or fingernail loss; numbness in fingers or toes; circulatory problems	Discharge from petroleum and metal refineries; erosion of natural deposits; discharge from mines	0.05
OC Simazine	0.004	Problems with blood	Herbicide runoff	0.004
OC Styrene	0.1	Liver, kidney, or circulatory system problems	Discharge from rubber and plastic factories; leaching from landfills	0.1
OC Tetrachloroethylene	0.005	Liver problems; increased risk of cancer	Discharge from factories and dry cleaners	zero
IOC Thallium	0.002	Hair loss; changes in blood; kidney, intestine, or liver problems	Leaching from ore-processing sites; discharge from electronics, glass, and drug factories	0.0005
OC Toluene	1	Nervous system, kidney, or liver problems	Discharge from petroleum factories	1
M Total Coliforms	5.0 percent ⁸	Coliforms are bacteria that indicate that other, potentially harmful bacteria may be present. See fecal coliforms and <i>E. coli</i>	Naturally present in the environment	zero
DBP Total Trihalomethanes (TTHMs)	0.080	Liver, kidney or central nervous system problems; increased risk of cancer	Byproduct of drinking water disinfection	n/a ⁹
OC Toxaphene	0.003	Kidney, liver, or thyroid problems; increased risk of cancer	Runoff/leaching from insecticide used on cotton and cattle	zero
OC 2,4,5-TP (Silvex)	0.05	Liver problems	Residue of banned herbicide	0.05
OC 1,2,4-Trichlorobenzene	0.07	Changes in adrenal glands	Discharge from textile finishing factories	0.07
OC 1,1,1-Trichloroethane	0.2	Liver, nervous system, or circulatory problems	Discharge from metal degreasing sites and other factories	0.2
OC 1,1,2-Trichloroethane	0.005	Liver, kidney, or immune system problems	Discharge from industrial chemical factories	0.003
OC Trichloroethylene	0.005	Liver problems; increased risk of cancer	Discharge from metal degreasing sites and other factories	zero

LEGEND

D Disinfectant

DBP Disinfection Byproduct





R Radionuclides

Contaminant	MCL or TT ¹ (mg/L) ²	Potential health effects from long-term ³ exposure above the MCL	Common sources of contaminant in drinking water	Public Health Goal (mg/L) ²
It is used to effectiveness are present). with higher such as virus organisms cc		Turbidity is a measure of the cloudiness of water. It is used to indicate water quality and filtration effectiveness (e.g., whether disease-causing organisms are present). Higher turbidity levels are often associated with higher levels of disease-causing microorganisms such as viruses, parasites and some bacteria. These organisms can cause short term symptoms such as nausea, cramps, diarrhea, and associated headaches.	Soil runoff	n/a
R Uranium	30µg/L	Increased risk of cancer, kidney toxicity	Erosion of natural deposits	zero
OC Vinyl chloride	0.002	Increased risk of cancer Leaching from PVC pipes; discharge from plastic factories		zero
M Viruses (enteric)	TT^7	Short-term exposure: Gastrointestinal illness (e.g., diarrhea, vomiting, cramps)	Human and animal fecal waste	zero
OC Xylenes (total)	10	Nervous system damage	Discharge from petroleum factories; discharge from chemical factories	10

D Disinfectant DBP Disinfection Byproduct







NOTES

1 Definitions

- Maximum Contaminant Level Goal (MCLG)—The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety and are non-enforceable public health goals.
- Maximum Contaminant Level (MCL)—The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to MCLGs as feasible using the best available treatment technology and taking cost into consideration. MCLs are enforceable standards.
- Maximum Residual Disinfectant Level Goal (MRDLG)—The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.
- Maximum Residual Disinfectant Level (MRDL)—The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.
- Treatment Technique (TT)—A required process intended to reduce the level of a contaminant in drinking water.
- 2 Units are in milligrams per liter (mg/L) unless otherwise noted. Milligrams per liter are equivalent to parts per million (ppm).
- 3 Health effects are from long-term exposure unless specified as short-term exposure.
- 4 Each water system must certify annually, in writing, to the state (using third-party or manufacturers certification) that when it uses acrylamide and/or epichlorohydrin to treat water, the combination (or product) of dose and monomer level does not exceed the levels specified, as follows: Acrylamide = 0.05 percent dosed at 1 mg/L (or equivalent); Epichlorohydrin = 0.01 percent dosed at 20 mg/L (or equivalent).
- 5 Lead and copper are regulated by a Treatment Technique that requires systems to control the corrosiveness of their water. If more than 10 percent of tap water samples exceed the action level, water systems must take additional steps. For copper, the action level is 1.3 mg/L, and for lead is 0.015 mg/L.
- 6 A routine sample that is fecal coliform-positive or *E. coli*-positive triggers repeat samples--if any repeat sample is total coliform-positive, the system has an acute MCL violation. A routine sample that is total coliform-positive and fecal coliform-negative or *E. coli*-negative triggers repeat samples--if any repeat sample is fecal coliform-positive or *E. coli*-positive, the system has an acute MCL violation. See also Total Coliforms.
- 7 EPA's surface water treatment rules require systems using surface water or ground water under the direct influence of surface water to (1) disinfect their water, and (2) filter their water or meet
- criteria for avoiding filtration so that the following contaminants are controlled at the following levels:
 Cryptosporidium: 99 percent removal for systems that filter. Unfiltered systems are required to include Cryptosporidium in their existing watershed control provisions.
- Giardia lamblia: 99.9 percent removal/inactivation

- · Viruses: 99.99 percent removal/inactivation
- · Legionella: No limit, but EPA believes that if Giardia and viruses are removed/inactivated according
- to the treatment techniques in the surface water treatment rule, *Legionella* will also be controlled.
 Turbidity: For systems that use conventional or direct filtration, at no time can turbidity (cloudiness of water) go higher than 1 nephelolometric turbidity unit (NTU), and samples for turbidity must be less than or equal to 0.3 NTU in at least 95 percent of the samples in any month. Systems that use filtration other than conventional or direct filtration must follow state limits, which must include turbidity at no time exceeding 5 NTU.
- · HPC: No more than 500 bacterial colonies per milliliter
- Long Term 1 Enhanced Surface Water Treatment; Surface water systems or ground water systems under the direct influence of surface water serving fewer than 10,000 people must comply with the applicable Long Term 1 Enhanced Surface Water Treatment Rule provisions (e.g. turbidity standards, individual filter monitoring, *Cryptosporidium* removal requirements, updated watershed control requirements for unfiltered systems).
- Long Term 2 Enhanced Surface Water Treatment; This rule applies to all surface water systems or ground water systems under the direct influence of surface water. The rule targets additional *Cryptosporidium* treatment requirements for higher risk systems and includes provisions to reduce risks from uncovered finished water storages facilities and to ensure that the systems maintain microbial protection as they take steps to reduce the formation of disinfection byproducts. (Monitoring start dates are staggered by system size. The largest systems (serving at least 100,000 people) will begin monitoring in October 2006 and the smallest systems (serving fewer than 10,000 people) will not begin monitoring until October 2008. After completing monitoring and determining their treatment bin, systems generally have three years to comply with any additional treatment requirements.)
- Filter Backwash Recycling: The Filter Backwash Recycling Rule requires systems that recycle to
 return specific recycle flows through all processes of the system's existing conventional or direct
 filtration system or at an alternate location approved by the state.
- 8 No more than 5.0 percent samples total coliform-positive in a month. (For water systems that collect fewer than 40 routine samples per month, no more than one sample can be total coliform-positive per month.) Every sample that has total coliform must be analyzed for either fecal coliforms or *E. coli*. If two consecutive TC-positive samples, and one is also positive for *E. coli* or fecal coliforms.
- system has an acute MCL violation.
- 9 Although there is no collective MCLG for this contaminant group, there are individual MCLGs for some of the individual contaminants:
- Haloacetic acids: dichloroacetic acid (zero); trichloroacetic acid (0.3 mg/L)
- Trihalomethanes: bromodichloromethane (zero); bromoform (zero); dibromochloromethane (0.06 mg/L)

National Secondary Drinking Water Regulation

National Secondary Drinking Water Regulations are non-enforceable guidelines regarding contaminants that may cause cosmetic effects (such as skin or tooth discoloration) or aesthetic effects (such as taste, odor, or color) in drinking water. EPA recommends secondary standards to water systems but does not require systems to comply. However, some states may choose to adopt them as enforceable standards.

Contaminant	Secondary Maximum Contaminant Level		
Aluminum	0.05 to 0.2 mg/L		
Chloride	250 mg/L		
Color	15 (color units)		
Copper	1.0 mg/L		
Corrosivity	noncorrosive		
Fluoride	2.0 mg/L		
Foaming Agents	0.5 mg/L		
Iron	0.3 mg/L		
Manganese	0.05 mg/L		
Odor	3 threshold odor number		
pH	6.5-8.5		
Silver	0.10 mg/L		
Sulfate	250 mg/L		
Total Dissolved Solids	500 mg/L		
Zinc	5 mg/L		

For More Information

EPA's Safe Drinking Water Web site: http://www.epa.gov/safewater/

EPA's Safe Drinking Water Hotline: (800) 426-4791

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EPA 816-F-09-004 May 2009 United States Environmental Protection Agency Office of Water (4606)

EPA 816-F-99-005 June 1999 www.epa.gov/safewater

EPA Guidance for People with Severely Weakened Immune Systems

(co-released with the Centers for Disease Control and Prevention, 1995)

INTRODUCTION

Cryptosporidium is a parasite commonly found in lakes and rivers, especially when the water is contaminated with sewage and animal wastes. *Cryptosporidium* is very resistant to disinfection, and even a well-operated water treatment system cannot ensure that drinking water will be completely free of this parasite. Current EPA drinking water standards were not explicitly designed to assure the removal or killing of *Cryptosporidium*. Many large water systems already voluntarily take actions for greater control of *Cryptosporidium* and other microbial contaminants. By 2001, the water systems serving the majority of the United States population (those relying on a surface water source, such as a river, and serving more than 10,000 people) must meet a new EPA standard that strengthens control over microbial contaminants, including *Cryptosporidium*. EPA continues to conduct research on microbial contaminants which will be used for determining priorities for the drinking water program, including setting future standards and reevaluating existing standards.

Cryptosporidium has caused several large waterborne disease outbreaks of gastrointestinal illness, with symptoms that include diarrhea, nausea, and/or stomach cramps. People with severely weakened immune systems (that is, severely immunocompromised) are likely to have more severe and more persistent symptoms than healthy individuals. Moreover, *Cryptosporidium* has been a contributing cause of death in some immuno-compromised people. Individuals who are severely immunocompromised may include those who are infected with HIV/AIDS, cancer and transplant patients taking immunosuppressive drugs, and people born with a weakened immune system.

BACKGROUND

Data are not adequate to determine how most people become infected. For example, we do not know the importance of drinking water compared to other possible sources of *Cryptosporidium*, such as exposure to the feces of infected persons or animals, sex involving contact with feces, eating contaminated food, or accidentally swallowing contaminated recreational water.

Thus, in the absence of an outbreak, there are insufficient data to determine whether a severely immunocompromised individual is at a noticeably greater risk than the general public from waterborne Cryptosporidiosis. Even a low level of *Cryptosporidium* in water, however, may be of concern for the severely immunocompromised, because the illness can be life-threatening. The risk of a severely immunocompromised individual acquiring Cryptosporidiosis from drinking water in the absence of an outbreak is likely to vary from city to city, depending on the quality of the city's water source and the quality of water treatment. Current risk data are not adequate to support a recommendation that severely immunocompromised persons in all U.S. cities boil or avoid drinking tap water.

In the absence of a recognized outbreak, this guidance has been developed for severely immunocompromised people who may wish to take extra precautions to minimize their risk of infection from waterborne *Cryptosporidiosis*. To be effective, the guidance must be followed consistently for all water used for drinking or for mixing beverages. During outbreaks of waterborne *Cryptosporidiosis*, studies have found that people who used precautions only part of the time were just as likely to become ill as people who did not use them at all.

GUIDANCE

EPA and CDC have developed the following guidance for severely immunocompromised people who may wish to take extra precautions. Such individuals should consult with their health care provider about what measures would be most appropriate and effective for reducing their overall risk of *Cryptosporidium* and other types of infection.

Although data are not sufficient for EPA/CDC to recommend that all severely immunocompromised persons take extra caution with regards to their drinking water, individuals who wish to take extra measures to avoid waterborne Cryptosporidiosis can bring their drinking water to a full boil for one minute. **Boiling water is the most effective way of killing** *Cryptosporidium*. As an alternative to boiling water, people may use the following measures:

] A point-of-use (personal use, end-of-tap, under-sink) filter. Only point-of-use filters that remove particles one micrometer or less in diameter should be considered. Filters in this category that provide the greatest assurance of *Cryptosporidium* removal include those that use reverse osmosis, those labeled as "Absolute" one micrometer filters, or those labeled as certified by NSF International under standard 53 for "Cyst Removal." The "Nominal" one micrometer rating is not standardized and many filters in this category may not reliably remove *Cryptosporidium*. As with all filters, people should follow the manufacturer's instructions for filter use and replacement. Water treated with a point-of-use filter that meets the above criteria may not necessarily be free of organisms smaller than *Cryptosporidium* that could pose a health hazard for severely immunocompromised individuals.

] **Bottled water**. Many, but not all, brands of bottled water may provide a reasonable alternative to boiling tap water. The origin of the source water, the types of microorganisms in that water, and the treatment of that water before it is bottled vary considerably among bottled water companies and even among brands of water produced by the same company. Therefore, individuals should not presume that all bottled waters are absolutely free of *Cryptosporidium*. Bottled waters derived from protected well and protected spring water sources are less likely to be contaminated by *Cryptosporidium* than bottled waters containing municipal drinking water derived from less protected sources such as rivers and lakes. Any bottled water treated by distillation or reverse osmosis before bottling assures *Cryptosporidium* removal. Water passed through a commercial filter that meets the above criteria for a point-of-use device before bottling will provide nearly the same level of *Cryptosporidium* removal as distillation or reverse osmosis. Bottled waters meeting the above criteria may not necessarily be free of organisms other than *Cryptosporidium* that could pose a health hazard for severely immunocompromised individuals.

Neither EPA nor CDC maintains a list of point-of-use filters or bottled water brands that meet the above criteria. NSF International can provide a list of filters that meet the NSF criteria. The NSF address is 789 N. Dixboro Road, PO Box 130140, Ann Arbor, Michigan 48113-0140; phone number (877) 8-NSF-HELP (http://www.nsf.org/). Individuals who contact bottlers or filter manufacturers for information should request data supporting claims that a brand of bottled water or filter can meet the above criteria.

FURTHER INFORMATION

When an outbreak of waterborne Cryptosporidiosis is recognized and is determined to be on-going, officials of the public-health department and/or the water utility will normally issue a "boil water" notice to protect both the general public and the immunocompromised.

Current testing methods cannot determine with certainty whether *Cryptosporidium* detected in drinking water is alive or whether it can infect humans. In addition, the current method often requires several days to get results, by which time the tested water has already been used by the public and is no longer in the community's water pipes.

Severely immunocompromised people may face a variety of health risks. Depending on their illness and circumstances, a response by such individuals that focuses too specifically on one health risk may decrease the amount of attention that should be given to other risks. Health care providers can assist severely immunocompromised persons in weighing these risks and in applying this guidance.

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Drinking Water Contaminants

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- Basic Information about E. coli 0157:H7 in Drinking Water

Basic Information about *E. coli* 0157:H7 in Drinking Water

Total Coliforms (including E. coli 0157:H7) at a Glance

Maximum Contaminant Level MCL = $5.0\% \frac{1}{2}$

Maximum Contaminant Level Goal MCLG = 0 ppm

Health Effects

Not a health threat in itself; it is used to indicate whether other potentially harmful bacteria may be present. $\frac{2}{2}$

Sources of contamination

Coliforms are naturally present in the environment; as well as feces; fecal coliforms and *E. coli* only come from human and animal fecal waste.

For other contaminants and their MCLs, visit the MCL list page.

- On this page
 - o Introduction
 - o <u>Questions and answers</u>

Other resources

- o Centers for Disease Control and Prevention's fact sheet on E. coli
- o Food and Drug Administration's Bad Bug Book

Introduction

One of hundreds of strains of the bacterium *Escherichia coli*. *E. coli* O157:H7 is an emerging cause of foodborne and waterborne illness. Although most strains of *E. coli* are harmless and live in the intestines of healthy humans and animals, this strain produces a powerful toxin and can cause severe illness.

E. coli O157:H7 was first recognized as a cause of illness during an outbreak in 1982 traced to contaminated hamburgers. Since then, most infections are believed to have come from eating undercooked ground beef.

However, some have been waterborne. In 1999, people became sick after drinking contaminated water in Washington County, New York and swimming in contaminated water in Clark County, Washington.

Information about the health effects of *E. coli* O157:H7, and actions you can take to protect yourself and your family from *E. coli* infection is provided below.

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Questions and Answers

- <u>What is *E. coli* and where does it come from?</u>
- <u>What are fecal coliforms?</u>
- How does E. coli or other fecal coliforms get in the water?
- What are the health effects of E. coli O157:H7?

- How long does it take for these symptoms of *E. coli* O157:H7 infection to occur?
- What should I do if I have any of the above symptoms?
- <u>Are there groups of people who are at greater risk of getting any of the symptoms?</u>
- What should these people who are at greater risk do? Are there any additional precautions they should take?
- How will I know if my water is safe?
- How is water treated to protect me from *E. coli*?
- How does the U.S. Environmental Protection Agency regulate *E. coli*?
- What can I do to protect myself from *E. coli* O157:H7 in drinking water?
- Will a water filter work to keep *E. coli* out of my water?
- If you have a private drinking water well
 - o If I have a private well, how can I have it tested for *E. coli*?
 - o If my well is contaminated with *E. coli*, what can I do to protect myself?

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What is E. coli and where does it come from?

E. coli is a type of fecal coliform bacteria commonly found in the intestines of animals and humans. *E. coli* is short for *Escherichia coli*. The presence of *E. coli* in water is a strong indication of recent sewage or animal waste contamination. Sewage may contain many types of disease-causing organisms.

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What are fecal coliforms?

Fecal coliforms are bacteria that are associated with human or animal wastes. They usually live in human or animal intestinal tracts, and their presence in drinking water is a strong indication of recent sewage or animal waste contamination.

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How does E. coli or other fecal coliforms get in the water?

E. coli comes from human and animal wastes. During rainfalls, snow melts, or other types of precipitation, *E. coli* may be washed into creeks, rivers, streams, lakes, or ground water. When these waters are used as sources of drinking water and the water is not treated or inadequately treated, *E. coli* may end up in drinking water.

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What are the health effects of E. coli O157:H7?

E. coli O157:H7 is one of hundreds of strains of the bacterium E. coli. Although most strains are
harmless and live in the intestines of healthy humans and animals, this strain produces a powerful toxin and can cause severe illness. Infection often causes severe bloody diarrhea and abdominal cramps; sometimes the infection causes non-bloody diarrhea. Frequently, no fever is present. It should be noted that these symptoms are common to a variety of diseases, and may be caused by sources other than contaminated drinking water.

In some people, particularly children under 5 years of age and the elderly, the infection can also cause a complication called hemolytic uremic syndrome, in which the red blood cells are destroyed and the kidneys fail. About 2%-7% of infections lead to this complication. In the United States, hemolytic uremic syndrome is the principal cause of acute kidney failure in children, and most cases of hemolytic uremic syndrome are caused by *E. coli* O157:H7. Hemolytic uremic syndrome is a life-threatening condition usually treated in an intensive care unit. Blood transfusions and kidney dialysis are often required. With intensive care, the death rate for hemolytic uremic syndrome is 3%-5%.

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How long does it take for these symptoms of E. coli O157:H7 infection to occur?

Symptoms usually appear within 2 to 4 days, but can take up to 8 days. Most people recover without antibiotics or other specific treatment in 5-10 days. There is no evidence that antibiotics improve the course of disease, and it is thought that treatment with some antibiotics may precipitate kidney complications. Antidiarrheal agents, such as loperamide (Imodium), should also be avoided.

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What should I do if I have any of the above symptoms?

Consult with your physician. Infection with *E. coli* O157:H7 is diagnosed by detecting the bacterium in the stool. Most laboratories that culture stool do not test for *E. coli* O157:H7, so it is important to request that the stool specimen be tested on sorbitol-MacConkey (SMAC) agar for this organism. All persons who suddenly have diarrhea with blood should get their stool tested for *E. coli* O157:H7.

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Are there groups of people who are at greater risk of getting any of the symptoms?

Children under the age of five, the elderly, and people whose health is immunocompromised (i.e., people who have long-term illnesses such as cancer or AIDS) are at greater risk of severe illness.

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What should these people who are at greater risk do? Are there any additional precautions they should take?

People who are at greater risk should consult with their doctor or health care provider and follow the

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instructions provided.

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How will I know if my water is safe?

If you get your water from a public water system, then your water system is required by law to notify you if your water is not safe. If you are interested in obtaining information about your drinking water, consult the water quality report that you should receive annually from your local water system, or call your local water system directly.

• Information on local water systems is also available on EPA's web site.

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How is water treated to protect me from E. coli?

The water can be treated using chlorine, ultra-violet light, or ozone, all of which act to kill or inactivate E. coli. Systems using surface water sources are required to disinfect to ensure that all bacterial contamination is inactivated, such as *E. coli*.

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How does the U.S. Environmental Protection Agency regulate E. coli?

According to EPA regulations, a system that operates at least 60 days per year, and serves 25 people or more or has 15 or more service connections, is regulated as a public water system under the Safe Drinking Water Act. If a system is not a public water system as defined by EPA's regulations, it is not regulated under the Safe Drinking Water Act, although it may be regulated by state or local authorities.

Under the Safe Drinking Water Act, EPA requires public water systems to monitor for coliform bacteria. Systems analyze first for total coliform, because this test is faster to produce results. Any time that a sample is positive for total coliform, the same sample must be analyzed for either fecal coliform or *E. coli*. Both are indicators of contamination with animal waste or human sewage.

The largest public water systems (serving millions of people) must take at least 480 samples per month. Smaller systems must take at least five samples a month unless the state has conducted a sanitary survey – a survey in which a state inspector examines system components and ensures they will protect public health – at the system within the last five years.

Systems serving 25 to 1,000 people typically take one sample per month. Some states reduce this frequency to quarterly for ground water systems if a recent sanitary survey shows that the system is free of sanitary defects. Some types of systems can qualify for annual monitoring.

Systems using surface water, rather than ground water, are required to take extra steps to protect against bacterial contamination because surface water sources are more vulnerable to such contamination. At a minimum, all systems using surface waters must disinfect.

In 2006, EPA issued a new rule to ensure that systems using ground water sources take action to treat their drinking water to address microbial contamination if it is identified as a problem. Disinfection will kill *E. coli* O157:H7.

• For more information on treatment visit EPA's microbial pathogens and disinfection byproducts web site.

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What can I do to protect myself from E. coli O157:H7 in drinking water?

Approximately 89 percent of Americans are receiving water from community water systems that meet all health-based standards. Your public water system is required to notify you if, for any reason, your drinking water is not safe. If you wish to take extra precautions, you can boil your water for one minute at a rolling boil, longer at higher altitudes. To find out more information about your water, see the Consumer Confidence Report from your local water supplier or contact your local water supplier directly.

- You can also obtain information about your local water system on EPA's web site.
- EPA's emergency disinfection of drinking water page

The Centers for Disease Control and Prevention (CDC) suggests other actions that you may take to prevent *E. coli* infection. These include:

- Avoid swallowing lake or pool water while swimming.
- Thoroughly cook ground beef and avoid unpasteurized milk.
- Make sure that persons with diarrhea, especially children, wash their hands carefully with soap after bowel movements to reduce the risk of spreading infection, and that persons wash hands after changing soiled diapers. Anyone with a diarrhea illness should avoid swimming in public pools or lakes, sharing baths with others, and preparing food for others.
- Cook all ground beef and hamburger thoroughly. Because ground beef can turn brown before disease-causing bacteria are killed, use a digital instant-read meat thermometer to ensure thorough cooking. Ground beef should be cooked until a thermometer inserted into several parts of the patty, including the thickest part, reads at least 160° F. Persons who cook ground beef without using a thermometer can decrease their risk of illness by not eating ground beef patties that are still pink in the middle.
- If you are served an undercooked hamburger or other ground beef product in a restaurant, send it back for further cooking. You may want to ask for a new bun and a clean plate, too.
- Avoid spreading harmful bacteria in your kitchen. Keep raw meat separate from ready-to-eat

foods. Wash hands, counters, and utensils with hot soapy water after they touch raw meat. Never place cooked hamburgers or ground beef on the unwashed plate that held raw patties. Wash meat thermometers in between tests of patties that require further cooking.

- Drink only pasteurized milk, juice, or cider. Commercial juice with an extended shelf-life that is sold at room temperature (e.g. juice in cardboard boxes, vacuum sealed juice in glass containers) has been pasteurized, although this is generally not indicated on the label. Juice concentrates are also heated sufficiently to kill pathogens.
- Wash fruits and vegetables thoroughly, especially those that will not be cooked. Children under 5 years of age, immunocompromised persons, and the elderly should avoid eating alfalfa sprouts until their safety can be assured. Methods to decontaminate alfalfa seeds and sprouts are being investigated.

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Will a water filter work to keep E. coli out of my water?

Most in-home filters will not. EPA recommends that you boil your water if you are concerned about its safety.

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If you have a private drinking water well

If you draw water from a private well, you can contact your state health department to obtain information on how to have your well tested for total coliforms and *E. coli* contamination. If your well tests positive for *E. coli*, there are several steps that you should take:

- 1. begin boiling all water intended for consumption,
- 2. disinfect the well according to procedures recommended by your local health department, and
- 3. monitor your water quality to make certain that the problem does not recur.

If the contamination is a recurring problem, you should investigate the feasibility of drilling a new well or install a point-of-entry disinfection unit, which can use chlorine, ultraviolet light, or ozone.

Other resources on private wells

- EPA's private drinking water wells web site
- EPA's emergency disinfection of drinking water page
- EPA's What to do after a flood for steps to disinfect your private drinking water well.
- <u>Centers for Disease Control and Prevention (CDC) suggests other actions you may take to</u> prevent <u>E. coli</u> infection.

If I have a private well, how can I have it tested for E. coli?

If you have a private well, you should have your water tested periodically. Contact your State laboratory certification officer to find out which laboratories have been certified for conducting total coliform analyses. (You may contact the Safe Drinking Water Hotline at 1-800-426-4791 for the address and phone number of this individual.) Then contact a certified lab near you and get instructions on how to send them a water sample. Typically, the lab will first test for total coliforms, which is a group of related organisms that is common in both the environment and in the gut of animals. If the sample is positive for total coliforms, the lab will determine whether *E. coli* is also present. *E. coli* is a type of total coliform that is closely associated with recent fecal contamination. Few *E. coli* strains cause disease. However, the presence of any *E. coli* in a water sample suggests that disease-causing organisms, are also likely to be present.

One of the strains of *E. coli* that causes disease is *E. coli* O157:H7. EPA does not believe it necessary for an owner of a private well to test specifically for this organism under normal circumstances. If *E. coli* O157:H7 is present in your well, it is highly likely that other strains of *E. coli* are also present. If a well is *E. coli*-positive, regardless of strain, you should not drink the water unless it is disinfected. Several tests are available for determining whether *E. coli* O157:H7 is present, but they are somewhat more expensive than the standard *E. coli* tests and many labs may not have the expertise or supplies to perform these tests. Your state's laboratory certification officer should be able to tell you which laboratories can perform these tests, or you can contact the lab directly.

• List of state laboratory certification officers

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If my well is contaminated with E. coli, what can I do to protect myself?

If your well tests positive for *E. coli*, do not drink the water unless you boil it for at least one minute at a rolling boil, longer if you live at high altitudes. You may also disinfect the well according to procedures recommended by your local health department. Monitor your water periodically after disinfection to make certain that the problem does not recur. If the contamination is a recurring problem, you should investigate the feasibility of drilling a new well or install a point-of-entry disinfection unit, which can use chlorine, ultraviolet light, or ozone.

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¹ More than 5.0% samples total coliform-positive in a month. (For water systems that collect fewer than 40 routine samples per month, no more than one sample can be total coliform-positive per month.) Every sample that has total coliform must be analyzed for either fecal coliforms or E. coli if two consecutive TC-positive samples, and one is also positive for E.coli fecal coliforms, system has an acute MCL violation.

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 2 Fecal coliform and E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Disease-causing microbes (pathogens) in these wastes can cause diarrhea, cramps, nausea, headaches, or other symptoms. These pathogens may pose a special health risk for infants, young children, and people with severely compromised immune systems.

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United States Environmental Protection Agency Office of Water (4606)

EPA 816-F-01-011 May 2001 www.epa.gov/safewater

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Interim Enhanced Surface Water Treatment Rule: A Quick Reference Guide

Overview of the RuleInterim Enhanced Surface Water Treatment Rule (IESWTR)
63 FR 69478 - 69521, December 16, 1998, Vol. 63, No. 241TitleRevisions to the Interim Enhanced Surface Water Treatment Rule (IESWTR), the Stage 1
Disinfectants and Disinfection Byproducts Rule (Stage 1 DBPR), and Revisions to State
Primacy Requirements to Implement the Safe Drinking Water Act (SDWA) Amendments
66 FR 3770, January 16, 2001, Vol 66, No. 29PurposeImprove public health control of microbial contaminants, particularly *Cryptosporidium*.
Prevent significant increases in microbial risk that might otherwise occur when systems
implement the Stage 1 Disinfectants and Disinfection Byproducts Rule.

General
DescriptionBuilds upon treatment technique approach and requirements of the 1989 Surface Water
Treatment Rule. Relies on existing technologies currently in use at water treatment plants.Utilities
CoveredSanitary survey requirements apply to all public water systems using surface water or
ground water under the direct influence of surface water, regardless of size. All remaining
requirements apply to public water systems that use surface water or ground water under
the direct influence of surface water and serve 10,000 or more people.

Major Provisions

Regulated Contaminants

Cryptosporidium	 Maximum contaminant level goal (MCLG) of zero. 99 percent (2-log) physical removal for systems that filter. Include in watershed control program for unfiltered systems. 		
Turbidity Performance Standards	 Conventional and direct filtration combined filter effluent: £ 0.3 nephelometric turbidity units (NTU) in at least 95 percent of measurements taken each month. Maximum level of 1 NTU. 		
Turbidity Monitoring Requirements (Conventional and Direct Filtration)			
Combined Filter Effluent	Performed every 4 hours to ensure compliance with turbidity		

bined Filter Effluent	•	Performed every 4 hours to ensure compliance with turbidity performance standards.	

Individual Filter Effluent

 Performed continuously (every 15 minutes) to assist treatment plant operators in understanding and assessing filter performance.

Additional Requirements

- Disinfection profiling and benchmarking.
- Construction of new uncovered finished water storage facilities prohibited.
- Sanitary surveys, conducted by the state, for all surface water and ground water under the direct influence of surface water systems regardless of size (every 3 years for community water systems and every 5 years for noncommunity water systems).



Profiling and Benchmarking

Public water systems must evaluate impacts on microbial risk before changing disinfection practices to ensure adequate protection is maintained. The three major steps are:

- Determine if a public water system needs to profile based on TTHM and HAA5 levels (applicability monitoring)
- Develop a disinfection profile that reflects daily Giardia lamblia inactivation for at least a year (systems using ozone or chloramines must also calculate inactivation of viruses)
- Calculate a disinfection benchmark (lowest monthly inactivation) based on the profile and consult with the state prior to making a significant change to disinfection practices

Critical Deadlines and Requirements

For Drinking W	ater Systems				
February 16, 1999	Construction of uncovered finished water reservoirs is prohibited.				
March 1999	Public water systems lacking ICR or other occurrence data begin 4 quarters of applicability monitoring for TTHM and HAA5 to determine if disinfection profiling is necessary.				
April 16, 1999	Systems that have 4 consecutive quarters of HAA5 occurrence data that meet the TTHM monitoring requirements must submit data to the state to determine if disinfection profiling is necessary.				
December 31, 1999	Public water systems with ICR data must submit it to states to determine if disinfection profiling is necessary.				
April 1, 2000	Public water systems must begin developing a disinfection profile if their annual average (based on 4 quarters of data) for TTHM is greater than or equal to 0.064 mg/L or HAA5 is greater than or equal to 0.048 mg/L.				
March 31, 2001	Disinfection profile must be complete.				
January 1, 2002	Surface water systems or ground water under the direct influence of surface water systems serving 10,000 or more people must comply with all IESWTR provisions (e.g., turbidity standards, individual filter monitoring).				
For States					
December 16, 2000	States submit IESWTR primacy revision applications to EPA (triggers interim primacy).				
January 2002	States begin first round of sanitary surveys.				
December 16, 2002	Primacy extension deadline - all states with an extension must submit primacy revision applications to EPA.				
December 2004	States must complete first round of sanitary surveys for community water systems.				
December 2006	States must complete first round of sanitary surveys for noncommunity water systems.				

For additional information	
on the IESWTR	

Call the Safe Drinking Water Hotline at 1-800-426-4791: visit the EPA web site at www.epa.gov/safewater; or contact your State drinking water representative.

Additional material is available at www.epa.gov/ safewater/mdbp/ implement.html.

Public Health Benefits

Implementation of the IESWTR will result in	•	Increased protection against gastrointestinal illnesses from <i>Cryptosporidium</i> and other pathogens through improvements in filtration.
	•	Reduced likelihood of endemic illness from <i>Cryptosporidium</i> by 110,000 to 463,000 cases annually.
	٠	Reduced likelihood of outbreaks of cryptosporidiosis.
Estimated impacts of the IESWTR	•	National total annualized cost: \$307 million
include	۲	92 percent of households will incur an increase of less than \$1 per month.
	•	Less than 1 percent of households will incur an increase of more than \$5 per month (about \$8 per month).



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After a Hurricane or Flood: Cleanup of Flood Water

When returning to your home after a hurricane or flood, be aware that flood water may contain sewage. Protect yourself and your family by following these steps:

Inside the Home

- Keep children and pets out of the affected area until cleanup has been completed.
- Wear rubber boots, rubber gloves, and goggles during cleanup of affected area.
- Remove and discard items that cannot be washed and disinfected (such as, mattresses, carpeting, carpet padding, rugs, upholstered furniture, cosmetics, stuffed animals, baby toys, pillows, foam-rubber items, books, wall coverings, and most paper products).
- Remove and discard drywall and insulation that has been contaminated with sewage or flood waters.
- Thoroughly clean all hard surfaces (such as flooring, concrete, molding, wood and metal furniture, countertops, appliances, sinks, and other plumbing fixtures) with hot water and laundry or dish detergent.
- Help the drying process by using fans, air conditioning units, and dehumidifiers.
- After completing the cleanup, wash your hands with soap and warm water. Use water that has been boiled for 1 minute (allow the water to cool before washing your hands).
 - Or you may use water that has been disinfected for personal hygiene use (solution of teaspoon [~0.75 milliliters] of household bleach per 1 gallon of water). Let it stand for 30 minutes. If the water is cloudy, use a solution of ¹/₄ teaspoon (~1.5 milliliters) of

household bleach per 1 gallon of water.

- Wash all clothes worn during the cleanup in hot water and detergent. These clothes should be washed separately from uncontaminated clothes and linens.
- Wash clothes contaminated with flood or sewage water in hot water and detergent. It is recommended that a laundromat be used for washing large quantities of clothes and linens until your onsite waste-water system has been professionally inspected and serviced.
- Seek immediate medical attention if you become injured or ill.

See also <u>Reentering Your Flooded Home</u>, <u>Mold After a Disaster</u>, and <u>Cleaning and Sanitizing With</u> <u>Bleach After an Emergency</u>.

Outside the Home

- Keep children and pets out of the affected area until cleanup has been completed.
- Wear rubber boots, rubber gloves, and goggles during cleanup of affected area.
- Have your onsite waste-water system professionally inspected and serviced if you suspect damage.
- Wash all clothes worn during the cleanup in hot water and detergent. These clothes should be washed separately from uncontaminated clothes and linens.
- After completing the cleanup, wash your hands with soap and warm water. Use water that has been boiled for 1 minute (allow the water to cool before washing your hands).
 - Or you may use water that has been disinfected for personal hygiene use (solution of teaspoon [~0.75 milliliters] of household bleach per 1 gallon of water). Let it stand for 30 minutes. If the water is cloudy, use solution of ¼ teaspoon (~1.5 milliliters) of household bleach per 1 gallon of water.
- Seek immediate medical attention if you become injured or ill.

The information in this fact sheet is general in nature and is not intended to be used as a substitute for professional advice. For more information, please contact your local, state, or tribal health department.

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