STOP HAIs IN THEIR TRACKS

1st Clinically-Tested UVC Product to Kill Germs on the Soles of Shoes

- Active Germ-Control System
- Patented and Patent-Pending Design
- Lower Healthcare Associated Infections
- Green Technology Disinfects Without Chemicals
- Quick ROI

INDEPENDENT CLINICAL LAB TEST RESULTS
High Efficacy and Kill Rates in Just 8 Seconds!

<table>
<thead>
<tr>
<th>Pathogen</th>
<th>Efficacy</th>
<th>Log Reduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staph aureus (MRSA)</td>
<td>99.98%</td>
<td>3.66 log</td>
</tr>
<tr>
<td>Clostridium difficile (C-Diff)</td>
<td>85.3%</td>
<td>0.83 log</td>
</tr>
<tr>
<td>Enterococcus faecalis (VRE)</td>
<td>99.75%</td>
<td>2.60 log</td>
</tr>
<tr>
<td>Escherichia coli (CRE)</td>
<td>99.87%</td>
<td>2.87 log</td>
</tr>
<tr>
<td>Streptococcus pyogenes</td>
<td>99.994%</td>
<td>4.20 log</td>
</tr>
<tr>
<td>Pseudomonas aeruginosa</td>
<td>99.2%</td>
<td>2.08 log</td>
</tr>
</tbody>
</table>

Results from independent 3rd party laboratory

HealthySolePlus.com

(800) 641-2008  •  detecto@cardet.com
Manage the shoeborne spread of deadly organisms in your facility

- The dirtiest, most-overlooked place in healthcare is the bottom of shoe soles walking around it
- Don’t let dangerous organisms travel into and out of high risk areas of healthcare ever again

Environmental surfaces are cleaned regularly, but can be re-contaminated from shoes. Toxigenic C-Diff, C. perfringens, and VRE are highly prevalent in shoe-bottom surfaces in the hospital environs and may have implications with HAIs. Results from shoe swab study in a hospital system concluded 45% of shoes soles positive for C-Diff, 100% positive for C. perfringens, 90% positive for VRE.1

Soles of Shoes of medical staff are a source of infection. Doctors shoes were positive for infectious bacteria 56% before rounds and 65% after rounds. Of object examined in this study (including hands) shoes are the largest reservoir of alert bacteria.2

In the OR contamination was found on 98% of outdoor shoes, 68% of morning theatre shoes, and 56% of end-of-day theatre shoes. Furthermore, floor bacteria may contribute up to 15% of airborne bacterial CFUs in the OR.3

Aerosols generated from a contaminated floor can reach breathing height, are within respirable size range, and could transmit infection.4