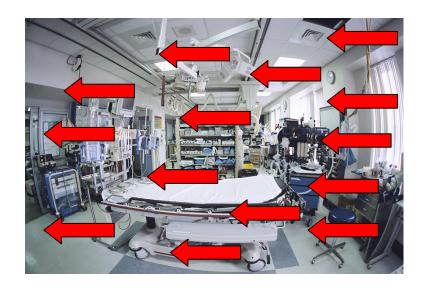
## HaloFogger vs. UV

Sanosil (HaloFogger)	TruD	Xenex	Surficide UV
EPA Registered Disinfection	Not regulated	Not regulated	Not regulated
System			
Microdroplets get everywhere	Light does not	Light does not	Light does not
EPA Registered 6 log <i>C.Diff</i> kill	?	?	?
Claim			
Rugged construction	Fragile	Fragile	Fragile
No Maintenance	Costly Bulb	Costly Bulb	Costly Bulb
	Replacement	Replacement	Replacement
No UV Damage	UV Sensitive	UV sensitive	UV sensitive
	materials	materials	materials
Compliance/Verification	No	No	No
Proven to lower HAIs	?	?	?
1 year full warranty	?	?	?
Easy to use, transport and store	?	?	?
MFR \$5000	MFR \$120,000	MFR \$85,000	MFR > \$20,000??
Maintenance	+ \$1,500-2,200/mo	+\$1,500-2,200/mo	+\$1,500-2,200/mo??



It only takes one spore to cause a deadly *C.diff* infection. *C. difficile* spores are known to be airborne and can travel throughout a heath care facility to pose a danger to other patients, their families and healthcare employees who work in the same environment.<sup>1</sup> How can you be sure every surface has been completely disinfected? HaloMist and the HaloFogger take disinfection to another level, a safe level with the assurance of a six log kill of *C. dfficile* spores on all surfaces in an entire room.<sup>2</sup> HaloMist provides complete and verifiable disinfection that reaches throughout a room and not just fomites in line of sight but locations above, below, around and underneath. UV devices are not regulated and do not have to pass rigorous regular efficacy tests that are mandated by EPA. When tested against fogging UV systems are simply not as effective as a thorough application of hydrogen peroxide that completely contacts all surfaces in the room and yet is safe for sensitive materials <sup>3,4</sup>

Would Benjamin Franklin use incomplete disinfection in his hospital? We don't think so and we can prove it with significantly lowered HAI rates in his former hospital! <sup>5</sup> HaloMist and HaloFogger together are a truly complete system that assures this sporicidal system gets disinfectant to every nook and cranny where spores can settle but can't hide.

## **References:**

- 1) Best EL, Fawley WN, Parnell P, et al. The potential for airborne dispersal of *Clostridium difficile* from symptomatic patients. Clin Infect Dis 2010;50:1450-1457.
- 2) EPA Registration 84536-6 <a href="http://iaspub.epa.gov/apex/pesticides/f?p=PPLS:8:13742216586831::NO::P8\_PUID,P8\_RINUM:511286,84526-6">http://iaspub.epa.gov/apex/pesticides/f?p=PPLS:8:13742216586831::NO::P8\_PUID,P8\_RINUM:511286,84526-6</a>
- 3) Office of Research and Development, National Homeland Security Research Center. EPA 600/R-10/169. Compatibility of Material and Electronic Equipment with Hydrogen Peroxide and Chlorine Dioxide Fumigation. Assessment and Evaluation Report. December 2010.
- 4) Havill NL, Moore BA, Boyce JM. Comparison of the Microbiological Efficacy of Hydrogen Peroxide\_Vapor and Ultraviolet Light Processes for Room Decontamination. Infect Control Hosp Epidemiol 2012;33(5):507-512.
- 5) Evaluation and Adoption of Hydrogen Peroxide Based Technology for Reducing Healthcare-Associated *Clostridium Difficile (C.difficile)* Infection Rates. HFC611EN\_E.