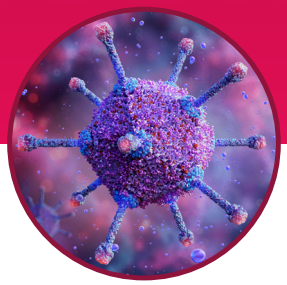
HOW WELL ARE YOU PROTECTING YOUR PATIENTS?

Your patients trust you with their vision. Are you truly doing everything you can to protect it?

Health authorities and professional associations are unequivocal: ophthalmic devices that touch the surface of the eye must undergo high-level disinfection (HLD) after every use.

But Why Does HLD Matter?

HLD eliminates a broad range of microorganisms, including those resistant to low-level disinfectants (LLD) like Adenovirus.[1] Transmission via ophthalmic devices can cause serious eye infections such as EKC and can also spread to the respiratory and gastrointestinal systems. HLD helps ensure devices do not become vectors of infection, protecting patients, staff, and clinical practice.



The Risk is Real

Outbreaks caused by inadequate disinfection of ophthalmic devices are more common—and more serious—than you may think. Peer-reviewed studies and CDC reports have documented numerous EKC outbreaks in eye care settings due to lapses in infection prevention. Examples include:

Adenovirus spread through contaminated ophthalmic devices during **ROP exams**, infecting 23 infants. **Four died from respiratory symptoms**[2]

Philadelphia NICU (2016)

Over **400 EKC cases** were reported, with at least **45 patients** developing severe complications, including keratitis[3]

Four U.S. states (2008–2010)

An outbreak resulted in **78 infections**, with **17% of patients** developing severe complications, such as corneal infiltrates[4]

U.S. Virgin Islands (2016)

An **outbreak** in an eye clinic infected **15 patients**, linked to improper disinfection, leading to patient discomfort and temporary clinic closure[5]

Los Angeles eye clinic (2017)

Studies show that commonly used low-level disinfectants are ineffective against Adenovirus, underscoring the critical need for robust disinfection protocols to prevent outbreaks and ensure patient safety.[1]

The Cost of Compromise

A single EKC outbreak can have significant financial consequences. We estimate that the one-day shutdown of the LA-based eye clinic resulted in up to $50,000 in lost revenue and staff expenses, excluding long-term impacts such as reputational damage and lost patient trust.

We hear you – what about operational efficiency and cost?

Enter Tristel OPH—FDA-cleared as the first HLD designed specifically for ophthalmic devices—ensuring safety, compliance, and cost savings without disrupting your workflow.

1. Rutala, W. A., et al. (2006). Efficacy of hospital germicides against adenovirus 8, a common cause of epidemic keratoconjunctivitis in health care facilities. Infection Control & Hospital Epidemiology, 27(6), 685-688.
2. Sammons, J. S., Graf, E. H., Townsend, S., et al. (2019). Outbreak of adenovirus in a neonatal intensive care unit: Critical importance of equipment cleaning during inpatient ophthalmologic examinations. Ophthalmology, 126(1), 137–143.
3. Centers for Disease Control and Prevention. (2013). Adenovirus-associated epidemic keratoconjunctivitis outbreaks — Four states, 2008–2010. MMWR, 62(32), 662-665.
4. Killerby, M. E., Stuckey, M. J., Guendel, I., et al. (2018). Epidemic keratoconjunctivitis outbreak associated with human adenovirus type 8 — U.S. Virgin Islands, June–November 2016. MMWR, 67(22), 627–630.
5. O'Yong, K., Killerby, M., Pan, C.-Y., et al. (2017). Outbreak of epidemic keratoconjunctivitis caused by human adenovirus type D53 in an eye care clinic — Los Angeles County. MMWR, 67(48), 1414–1417.
6. Ofstead, C. L., Quick, M. R., Eiland, J. E., & Adams, S. J. (2017). A Glimpse at the True Cost of Reprocessing Endoscopes.

Tristel OPH™ HIGH-LEVEL DISINFECTION MADE SIMPLE

Tristel OPH is a high-level disinfectant (HLD) foam for reprocessing ophthalmic medical devices:

- **DIAGNOSTIC AND LASER LENSES**
- **TONOMETER PRISMS**
- **PACHYMETERS**
- **A-SCAN AND B-SCAN PROBES**
- **PEDIATRIC RETINAL IMAGING LENSES**

Made for fast-paced eye care settings, Tristel OPH helps ensure patient safety and regulatory compliance while making HLD fast, simple and cost-effective.

Efficiency Meets Compliance

- **Easy-to-Use:** Ready-to-use foam, applied with a wipe at point-of-care
- **Fast-Acting:** Achieves HLD in just 2 minutes
- **Proven Efficacy:** Effective against critical microorganisms including Adenovirus
- **Broad Compatibility:** Confirmed compatible with devices of most major manufacturers
- **Regulatory Compliance:** FDA-cleared and validated HLD for ophthalmic devices

HLD Without Compromise

- **User & Patient Safety:** Tristel OPH is non-mutagenic, non-clastogenic in maturing erythrocytes, non-orally toxic, and is non-corrosive to the skin or eyes. Residue levels are non-toxic
- **No Workflow Disruption:** Tristel OPH delivers fast, consistent HLD at or near the point-of-care—supporting patient flow and minimizing delays in busy clinical settings
- **Maximize Device Availability, Minimize Costs:** Tristel OPH keeps devices in rotation with fast, accessible reprocessing—so you can see more patients with fewer devices, saving time and reducing equipment costs
- **Affordable & Scalable:** Unlike care settings where true HLD costs exceed $15 per cycle[6], Tristel OPH offers a low-labor, cost-effective solution—eliminating the need for device transport, costly machines, contracts, and infrastructure

A SMARTER WAY TO HLD—REACH OUT TODAY!

SCAN THE QR CODE OR CONTACT US TO FIND OUT MORE

EMAIL **MAIL-US@TRISTEL.COM** CALL **857.557.8023**

Tristel™
We have chemistry