



Oregon Health Authority
Public Health Division

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Food, Pool, Lodging – Health & Safety

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PUBLIC HEALTH SERVICES INFORMATION BULLETIN Interpretation Manual Fecal Accident Protocol / Pools & Spas

Question:

What should I do to handle fecal accidents in the swimming pool or spa?

Background:

The Centers for Disease Control have the best current information, published in a document titled; “Fecal Incident Response Recommendations for Pool Staff.”

Interpretation / Guideline:

The Oregon Health Authority recommends the use of the CDC document, it is obtainable at:

<https://www.cdc.gov/healthywater/swimming/pdf/fecal-incident-response-guidelines.pdf> (revised September 15, 2016)

Please review this new CDC document, there are very significant changes, especially concerning pools that use Cyanuric acid.

This document has the latest information on disinfection times at different chlorine levels for several organisms. It replaces the 9/15/2012 Oregon “Fecal Accident Protocol” document.

The pool operator should be aware of what is happening in their community. Timely response, either by treatment, closing, or swimmer restrictions can make a big difference in getting an outbreak under control.

Waterborne illnesses can be transmitted in swimming pool water or natural bodies of water, through fecal/oral transmission, and by consuming contaminated food and drinking water. They can be intestinal, respiratory, or cause a rash or irritation of the skin, eyes, ears or nasal passages. It is the responsibility of the local health department (LPHA) to investigate any outbreak and take steps to deal with the outbreak.

This document only addresses fecal accidents. If you have an unexplained intestinal illness (especially if several people have the same symptoms), see your Doctor. If it involves any reportable disease, they will contact the LPHA. If you are unsure about what to do, consult with your LPHA. If an outbreak is occurring, the LPHA will provide you any necessary further instructions. If it involves public pools the LPHA will contact pool operators with further instructions.

Note: The LPHA is generally the local county health department.

A very significant change to CDC's fecal incident protocol will affect pools that use stabilized Chlorine (e.g. TriChlor, DiChlor), or Cyanuric acid (CYA) as an independent chemical to protect Chlorine from UV degradation. As you see in the CDC document, if there is a diarrheal incident in a pool with stabilizer, the first step is to lower the CYA level to 15 ppm. Given where most pools run their CYA, this is big. The only way to remove CYA is partial drain and fill. This can be problematic in areas with high water tables, especially if they are starting with a CYA beginning in the 75-100+ ppm range and need to drain a large proportion of the water. Also, if you are partially draining a pool to remove CYA it is crucially important that as the water level drops, you scrub the walls with a brush or pad to remove CYA. If this step is skipped, residual CYA will stick to the walls, and when you re-fill, it may appear the CYA level never dropped. Given the cost (and availability) of water, skipping the elbow grease may be quite expensive.