
Solution Delivery System Information Log Sheet

SDS System Information Sheet

Complete this information for your records and as an aid to equipment identification when ordering spare parts or seeking technical assistance.

Facility Name/Number: _____

Account Number: _____

Model Number: _____

SDS Type: Remote____ Local____

Number of Acids: 0____ 1____ 2____ 3____

Bicarb Head Tank Size: 10____ 15____ 30____

Bicarb Mix Tank Size: 70____ 100____

Auxiliary Acid Loop Pump: Internal____ External____ Other____

Acid Storage Type: Bulk____ Drum____

SDS Remote Monitor: Yes____ No____

Auto Fill Timer: Yes____ No____

Number of Bicarb Loops: 1____ 2____

Number of Acid Loops: 0____ 1____ 2____

Number of Patient Stations on each Loop: Loop #1____ Loop #2____

Ozone System: Yes____ No____

Height From Head Tank Floor to Head Tank Bottom: ft____ in____

Remote Bulk Transfer Pump Assembly: Yes____ No____

Inlet Water Filter: Yes____ No____

Mix Tank Vent Filter: Standard____ Carbon____

Loop Routing: Under Floor____ Overhead____

Wall Box Part Number: _____

Bicarb and Acid Connection Type: Althin____ Baxter____ Cobe____

Fresenius____ Other____