# **Datasheet for Well Water Sample Collection-Understanding the Effects of Arsenic on Aging**

# **About this project**

The Arsenic and Aging project engages Legacy Scholars Program participants and others age 55+ in testing their well water for arsenic and other heavy metals. Legacy Scholars complete an annual survey on personal wellness and health which we will correlate with exposure to arsenic and other heavy metals in drinking water. If you are not already, but are interested in becoming a Legacy Scholar, you are welcome to join. Visit <https://www.une.edu/ceah/legacy-scholars>. Joining this program is not a requirement to participate in this well water monitoring project.

# **Sampler Information**

**Sample year and number (YYYY-XXX):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sample date (when water is collected):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Sample time:** \_\_\_\_\_\_\_\_\_\_\_\_**AM / PM**

**Sampler Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_

**Sampler Role in Project (circle one) Legacy Scholar** **Other community member** **Other** \_\_\_\_\_\_\_\_\_\_\_\_

**Email of person who will receive sample test results:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Street Address of Sample:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City of Sample:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State of Sample:** \_\_\_\_\_\_\_\_\_ **ZIP code of Sample :**\_\_\_\_\_\_\_\_\_\_

**Water Sample Source (circle one):**

Public Supply Dug well (10-30 ft deep) Driven well (30-50 ft deep) Drilled well (50+ ft deep) Unknown well type Other

**Mailing Address of sample contributor (please re-enter if same as address of sample):**

**Mailing Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing Address City**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mailing Address State**\_\_\_\_\_\_\_ **Mailing Address Zip** \_\_\_\_\_\_\_\_

# **Permissions**

Researchers from partner institutions are interested in the data collected as part of this project. One possible use of the well water data may be to create scientific maps showing the relationship between arsenic levels and soils or bedrock or other data. These maps will be used for community and scientific discussions and potentially publication in scientific journals. These maps will not display your name or home address, nor will they show any identifying features, like streets, that may expose your identity or location. May we share your data with other researchers? Circle one. YES NO

The Maine Center for Disease Control and Prevention (CDC) is interested in the data collected as part of this project so that they can better serve the public health needs in each area of the state. They will keep your data confidential. May we share your data with them? Circle one. YES NO

**--------Please continue and sign on the back page--------**

**Drinking Water Information**

**Have you ever tested your water for arsenic before (circle one)**?

Yes No I don’t know

**If so, what were your results? (specify units such as µg/L, mg/L, ppb)** \_\_\_\_\_\_\_

# **Water Sample Information**

**Confirm sample was taken from Kitchen (circle one):** Yes No (explain)

**Was the sample filtered? (circle one)** Yes No I don’t know

**Type of filtration system through which sample was collected (circle one):**

No filter Water pitcher or refrigerator Sink-mounted filter

Whole-house filter Other I don’t know

# Do not bypass your filter to take a sample for this project, so we can evaluate what you are actually consuming. But please explain how and why you currently filter your water (if at all).

# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Results**

You will receive an e-mail to let you know when and how to retrieve your test results when they are available; it may take up to 6-8 weeks after samples are mailed to us. You will need your sample number to check your results; as a reminder, your sample number is located on the magnet you received with your sampling kit.

# **Disclaimer**

I understand Dartmouth’s Trace Element Analysis Core (TEAC) produces reliable data for research purposes. Although TEAC is not certified by the National Environmental Laboratory Accreditation Program, it does participate in the USGS proficiency program for water quality measurements which conducts an inter-laboratory comparison study semiannually. I understand that I can always re-test my well water using a certified private or state water quality laboratory if I have concerns.

Resident Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*required for sample analysis*) Date \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_

Please return this signed datasheet with your sealed water sample in the self-addressed postage paid envelope that you received with your water sampling kit. Contact Dr. Jane Disney with questions at **jdisney@mdibl.org**