

Safe-Flo™

Saliva Ejectors and Valves



Frequently Asked Questions (FAQs)

Q: What is backflow?

A: Backflow is the movement of fluid in the opposite direction from which it was originally moving. In the case of a dental unit evacuation system, backflow is the flow of fluids from the evacuation line back into a patient's mouth.

Q: When does backflow occur?

A: Backflow can occur under many situations. Research studies¹⁻³ indicate that backflow occurs when there is a fluctuation in the vacuum pressure that typically occurs when the tip of the saliva ejector is blocked by the cheek, tongue or other part of the mouth in addition to when a patient seals their lips around a saliva ejector, creating a partial vacuum. Backflow can also occur if suction tubing is positioned above the patient's mouth or during simultaneous use of other evacuation (high-volume) equipment.¹⁻³ **Studies have also shown this backflow could potentially occur 21% of the time (1 out of every 5 patients).**⁴ According to the CDC, although no adverse health effects associated with the saliva ejector have been reported, practitioners should be aware that in certain situations, backflow could occur when using a saliva ejector.⁵ Safe-Flo™ Saliva Ejectors and Valves were specially developed to stop backflow during these conditions and protect patients by preventing this potential cross-contamination risk.

Q: How do Safe-Flo™ Saliva Ejectors and Valves work?

A: All Safe-Flo™ Saliva Ejector and Valve products contain an internal, one-way seated valve. When used on both the low-volume and high-volume (HV) evacuation lines, the one-way valve opens and allows the evacuation of fluids from the patient's mouth. When the vacuum pressure changes, such as when the patient closes their mouth around the saliva ejector tip or the tip becomes blocked, the valve immediately snaps into the closed position creating a physical barrier to prevent the backflow of residual blood, saliva and other potentially infectious materials into the patient's mouth.

Q: Are Safe-Flo™ Saliva Ejectors and Valves single-use products?

A: Yes. Safe-Flo™ Saliva Ejectors and Valves are for single-use only and must be disposed of after each use.

Q: How do I use a Safe-Flo™ Saliva Ejector?

A: The Safe-Flo™ Saliva Ejector is designed to be used like a standard saliva ejector on the low-volume evacuation line. Simply insert the Safe-Flo™ Saliva Ejector onto the open valve of the suction tubing and bend the saliva ejector as preferred/needed.

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Q: Do I need to modify my procedures to use Safe-Flo™ Saliva Ejectors or Valves?

A: No. The integrity of suction and performance of the saliva ejector or HVE tip is not affected, so there is no need to change how you work in order to protect your patients when using Safe-Flo™ Saliva Ejectors and Valves.

Q: What is the difference between the Safe-Flo™ Saliva Ejector and Safe-Flo™ SE Valve?

A: The Safe-Flo™ Saliva Ejector is an all-in-one saliva ejector with the built-in valve. This all-in-one system would be used in place of the saliva ejector currently used by the office/practice. The Safe-Flo™ SE Valve is an adapter that allows use with any standard saliva ejector. The combination of the Safe-Flo™ SE Valve and the saliva ejector of your choice provides the dental practice another convenient and effective way to provide patients with the added benefit of backflow prevention.

Q: Why should I use the Safe-Flo™ HV Valve?

A: The same conditions that cause backflow when using a saliva ejector could also occur when using an HVE tip. The Safe-Flo™ HV Valve can be easily connected to your favorite brand of standard HVE tip and then inserted into the HV evacuation line.

Q: What is the difference between the Safe-Flo™ HV Valve and the Safe-Flo™ Adapter?

A: The Safe-Flo™ HV Valve and Adapter are both used on the HV evacuation line. The Safe-Flo™ HV Valve is used on an HVE tip while the Safe-Flo™ Adapter allows use of the HV evacuation line with a standard saliva ejector.

Not made with natural rubber latex

1) Barbeau J, ten Bokum L, Gauthier C, Prevost AP. Cross-contamination potential of saliva ejectors used in dentistry. J Hosp Infect 1998; 40:303–11. 365.

2) Mann GL, Campbell TL, Crawford JJ. Backflow in low-volume suction lines: the impact of pressure changes. J Am Dent Assoc 1996;127:611–5. 366.

3) Watson CM, Whitehouse RL. Possibility of cross-contamination between dental patients by means of the saliva ejector. J Am Dent Assoc 1993;124:77–80.

4) Miller C. Back flow in low-volume suction lines may lead to potential cross-contamination. RDH. 1996; 16(1):30.

5) Center for Disease Control and Prevention. Guidelines for Infection Control in Dental Health Care Settings-2003. MMWR 2003;52 (no. RR-17); [31].

Hu-Friedy Mfg. Co., LLC, 1666 E. Touhy Ave., Des Plaines, IL 60018 | HuFriedyGroup.com

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The logo for HuFriedyGroup, featuring a stylized blue and red dot pattern to the left of the text "HuFriedyGroup" in a bold, sans-serif font. Below the text is the tagline "The Best In Practice" in a smaller, blue font.